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Promoting Healthy Diets: Challenges and Opportunities of Nutrition Policy Implementation in Food Banks

Sarah Brown-Anson

University of Massachusetts Amherst

Elizabeth Leibinger

University of Massachusetts Amherst

Hadassah Masudi Minga

University of Massachusetts Amherst

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SCHOOL OF PUBLIC POLICY CAPSTONE

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Sarah Brown-Anson

Elizabeth Leibinger

Hadassah Masudi Minga

Faculty Advisor:

Professor Marta Vicarelli, Economics Department and School of Public Policy,
University of Massachusetts Amherst.



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Executive Summary

In recent years, food banks have grown increasingly aware of the role diet plays in wide-spread public health issues such as cardiovascular disease, diabetes, and obesity. Food banks already purchase healthy foods directly and select nutritious items distributed by government programs such as The Emergency Food Assistance Program (TEFAP). Recently, some banks have implemented nutrition policies to regulate donations made by businesses and individuals to further decrease the volume of less healthy options in their warehouses.

This study explores the challenges and opportunities associated to the implementation of nutrition policies for donated food items by Food Banks in the USA. An area of special focus is the possible deterioration of donor relations after the implementation of nutrition policies. We collected information by designing and implementing a survey targeting twenty-one food banks across the United States.. Fourteen respondents had nutrition policies, and were asked to discuss how they created, implemented, communicated, and evaluated those policies. Six respondents had no nutrition policy, and one had reversed its policy. These food banks were asked to describe the barriers to creating or implementing a policy and any current practices that promote the distribution of nutritious foods.

Survey results from Food Banks with nutrition policies identify a set of **best practices** associated to successful design and implementation of nutrition policies:

1. First, nearly all respondents with policies assembled a group of *diverse stakeholders* to draft the food policy.
2. Second, several respondents recommended an *incremental approach*. Building awareness and buy-in among internal and external stakeholders over time prior to creating a policy can prevent implementation issues. This approach requires clear communication with stakeholders throughout the policy creation and implementation process. Further, stringent nutrition policies need not be enacted overnight. Several food banks' nutrition policy committees meet annually or semi-annually to review the policy and incorporate bans or restrictions on additional items.
3. Third, nutrition policies can be tailored to *accommodate variation in food banks' needs*. For example, a food bank with a strong interest in preserving donor relationships may choose to accept all donations and focus its policy instead on what may be distributed. A food bank more concerned about warehouse capacity or the cost of food disposal may choose to reject unwanted donations.

An important result related to **donor relations** is that there does not seem to be any association between rejecting donations and damaging relationships with donors. On the contrary, we found that no food banks reported having fewer donors after implementing a nutrition policy, regardless of their decision to reject unwanted food donations. Further, only one bank that chose to reject donations reported that creating a nutrition policy had a negative effect on donor relationships.

Meanwhile, three food banks that reject donations and three food banks that do not reject donations indicated that donor relationships actually improved after implementing a nutrition policy because the policy created opportunities for positive reinforcement, new donor relationships in the public health arena, and capacity-building in the community. Finally, a majority of food banks with nutrition policies reported that the quality and quantity of donations increased after implementation.

Efficient communication strategies appear to be key during the implementation process. Few respondents utilized formal communication methods such as surveys and focus groups during their policy design and implementation stages to collect feedback from internal stakeholders and donors. However, such techniques would facilitate policy evaluation and clarify the policy's impact on donors, member agencies, and internal stakeholders.

Our **recommendations** for food banks considering establishing a nutrition policy can be organized as a series of steps:

1. The first step is to form a nutrition policy working group to explore ideas and ensure all stakeholders' voices are heard.
2. The second step is to include in the policy implementation design a communication strategy to regularly and iteratively collect feedback from stakeholders. We recommend incorporating a formal policy evaluation in the implementation design, from the very beginning. The program evaluation can be done through a survey or focus groups, collecting data pre- and post-policy implementation.
3. The third step is to focus on the food bank's internal processes, including sourcing healthy food and imposing internal regulations on what foods may be distributed from the warehouse, while continuing to accept all donations.
4. The fourth step is to turn the focus toward external stakeholders by building capacity among member agencies, communicating with donors about the potential policy, and conducting outreach to foundations and organizations in the public health arena to expand a supportive donor base.
5. The fifth step is to start the official implementation and begin rejecting unwanted donations.
6. The sixth step is to complete the policy evaluation post-implementation to assess if the policy requires changes or if it can be further expanded.

1. Introduction

Although the first food bank was founded in the late 1960s, food banks did not begin to proliferate until the 1980s, when the Reagan administration decreased public spending on hunger relief. (USDA, 2017) Since then, the charitable food sector has come to play an increasingly central role in ensuring that millions of food-insecure Americans receive enough food. Over the same time period, the number of Americans affected by diet-related chronic illnesses like obesity, diabetes, and cardiovascular disease has dramatically increased. (CDC, 2018) As a result of these public health crises, as well as clients' long-term reliance on food bank assistance, the charitable food sector has become increasingly determined to avoid contributing to these systemic public health issues, and to distribute quality, nutritious foods. This translated in the design and implementation of nutrition policies aimed at improving the nutritional value of food distributed.

During the Spring semester of 2018, the School of Public Policy of the University of Massachusetts Amherst partnered with the Food Bank of Western Massachusetts in a research projects aimed at gathering information about how food banks create, implement, communicate, and evaluate nutrition policies. Our study identified best practices food banks might use to create and implement an effective nutrition while maintaining positive donor relationships.

Of the United States' approximately 300 food banks, 200 are members of Feeding America, the charitable food sector's national umbrella organization. (Feeding America, 2018) The Food Bank of Western Massachusetts (FBWM), which serves the four counties in western Massachusetts, is a member of the Feeding America network and currently exceeds Feeding America's targets for the proportion of healthy foods a bank should distribute. However, its important role in the region's safety net has led the FBWM to begin considering how it might implement a nutrition policy that further restricts the amount of unhealthy foods that can be donated by businesses and individuals. This task is complicated by the limited number of potential large donors in rural Western Massachusetts and the resulting desire to maintain strong, positive relationships with existing large donors.

In the context of this study, food bank refers to nonprofit organizations that collect and store food to distribute to member agencies. Member agencies are community organizations like food pantries, religious organizations, and community centers that distribute food directly to those in need. Clients are people who receive food from member agencies. Internal stakeholders are food bank staff, volunteers, board members, and any others with roles inside the food bank. In-kind donors are organizations or individuals who donate food, as opposed to making financial contributions.

In section two of this report, we provide a brief background on the context of food banks' decisions to either implement or avoid creating nutrition policies to regulate donated foods, as well as the resources available to support the creation of such policies. Section three describes the methodology used to design and conduct our survey. Results and case studies are presented in

section four. Section five discusses best practices and recommendations for implementing an effective nutrition policy. Section six concludes the report by summarizing the landscape faced by food banks that implement nutrition policies.

2. Background

Food banks have transformed from an emergency system at their founding to a long-term support system today. These charitable organizations support millions of poverty-stricken Americans along with government programs like the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). While food bank leaders often highlight their commitment to distribute nutritious foods, their organizations face increasing pressure from both internal and external stakeholders to limit the distribution of foods high in sugar and salt with little nutritional value. Food banks are aware that certain foods contribute to systemic diet-related public health issues including diabetes, hypertension, and obesity, which disproportionately affects the poor and persons of color (Fisher, 2017). Many food-insecure Americans also reside in food deserts, which are areas in which a substantial portion of an area's population reside far from a supermarket, and therefore have limited access to fresh food (Ploeg et al, 2009).

In response to these public health concerns, some food banks have created formal, written nutrition policies to encourage donations of produce and protein and limit or ban donations of candy, snacks, and sugar-sweetened beverages. Food banks face real and perceived barriers to implementing such policies. These barriers include the potential for damaging donor relationships, the logistical challenges involved in implementing a policy, and the difficulty in securing buy-in from staff and other stakeholders.

In addition to these internal challenges, food banks must also confront external obstacles, primarily in the secondary food market. One midwestern food bank described a startup company that purchases unwanted food from grocery stores and resells those items to restaurants, catering services, and discount stores (Bohnert, 2017). Faced with a profitable alternative to donation, grocers may change their policies around donating to food banks, particularly if food banks implement policies that restrict what can be donated. In the case of this midwestern food bank experiencing competition from the secondary food market, leadership felt implementing a nutrition policy was too risky.

However, food banks have gained external sources of support as well. Both Feeding America and a nonprofit organization called MAZON: A Jewish Response to Hunger are shifting their focus to help food banks build capacity to address public health concerns. MAZON has collaborated with many food banks to form nutrition policies, and recently released the first in a series of reports about the impact of nutrition policies on food banks nationally. MAZON's report was based on a large-scale survey conducted in the spring of 2017. Reaching 196 food banks across the country, this survey asked whether banks had a written nutrition policy in place, and whether

that policy bans particular food items. (Feldman, 2018) Our survey parallels MAZON's research in some ways, but in reaching out to a smaller sample of food banks, researchers were able to gather more detailed qualitative data about how food banks reached the decision to implement nutrition policies, who participated in creating these policies, and how the policies are communicated and evaluated.

3. Methodology

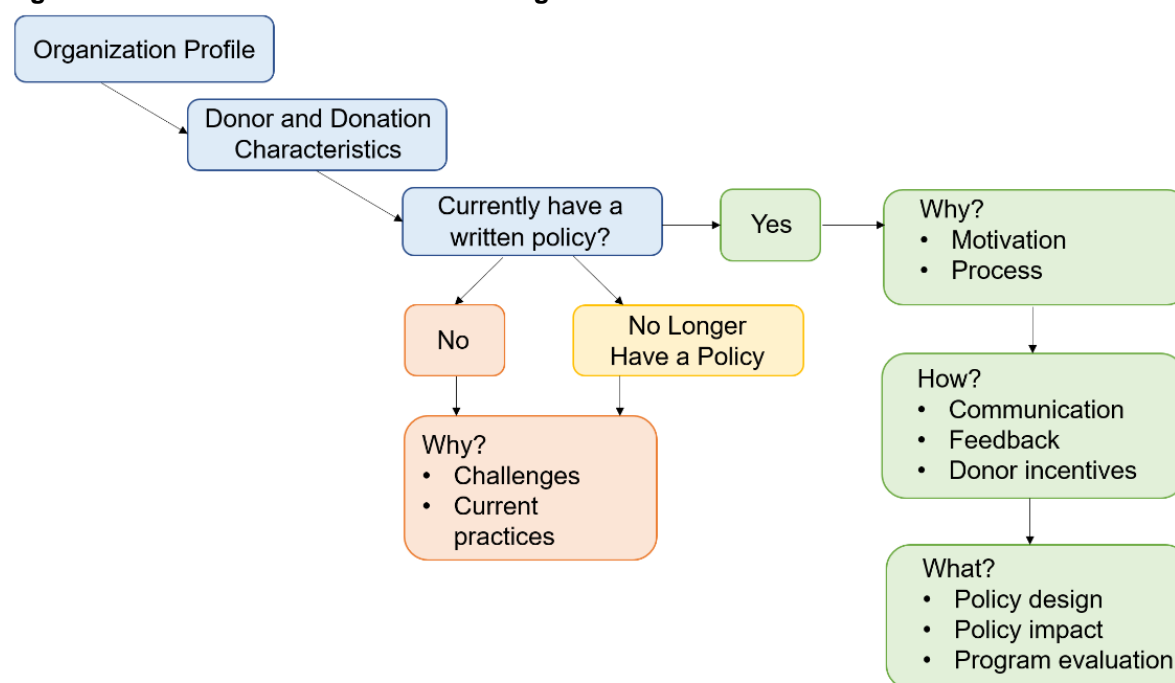
In total, forty food banks were contacted with an invitation to participate in our study. First, we identified a sample of food banks comparable in size and population served to our client was identified. These food banks have a service area of less than 10,000 square miles and serve a population of fewer than 140,000 food-insecure individuals. Then, we expanded the sample by deliberately oversampling food banks that already have nutrition policies in place. These food banks were identified with the assistance of Feeding America personnel and MAZON publications, and cover service areas and populations both larger and smaller than our client. Twenty-one food banks completed the survey, which was conducted by telephone.

Of the final sample of twenty-one food banks, three participated in the study as focus groups in order to test and refine the survey. The further eighteen food banks responded to the finalized survey. Survey respondents were typically senior officers from each food bank. Where these staff members did not have the information requested, survey questions were forwarded to the proper individual at that food bank by email. In cases where food bank staff ran out of time to complete the questionnaire, questions were again sent by email.

Figure 1 presents the survey design, while Appendix A reproduces the survey in full. The survey collected information about each food bank's donor and donation characteristics. Then, the survey branched into two possible paths. Food banks that did not have a nutrition policy responded to questions about what challenges they might face in implementing a policy, and described their current practices, if any, to ensure the distribution of nutritious foods. Food banks that did have a nutrition policy responded to questions about their motivation and process for creating, their implementation of the policy, including how they communicated with stakeholders, and what the policy included, including the policy design and impact on donors and donations. Respondents were also asked whether donors were offered any incentives to comply with the policy, and whether the bank had conducted a formal evaluation of the policy.

Each survey was audio recorded and produced both quantitative and qualitative data. Quantitative data was coded and entered into a database, while qualitative data was recorded in written summaries. Descriptive statistics were produced for quantitative data, while thematic analysis was conducted on qualitative data. Qualitative data was also condensed into several case studies, presented below.

Figure 1. Flowchart of Questionnaire Design



4. Results

Twenty-one food banks responded to our survey. Fourteen had written nutrition policies, six had no nutrition policy, and one had previously had a nutrition policy but no longer enforced it.

4.1 Sample Characteristics

Three food banks were not members of Feeding America. Each of these unaffiliated food banks had a nutrition policy. Food banks affiliated with Feeding America are classified based on size of the area served, number of food insecure residents, availability of resources (including household income and retail volume), and the cost of food distribution. Seven food banks in our sample share the Apricot-Mango classification with our client, the Food Bank of Western Massachusetts, who also participated in our survey. Apricot-Mango food banks have a smaller service area size, lower level of food insecurity, lower to intermediate amount of resources available, and higher operational costs (Weinfield et al., 177). Three of the study participants fall into Feeding America's Apple grouping, with a smaller service area size, higher level of food insecurity, greater amount of resources, and higher cost to operate. Two food banks were in the Blueberry category, with an intermediate service area size, higher level of food insecurity, greater amount of resources, and intermediate operational costs. An additional two belonged to the Orange-Papaya group, with

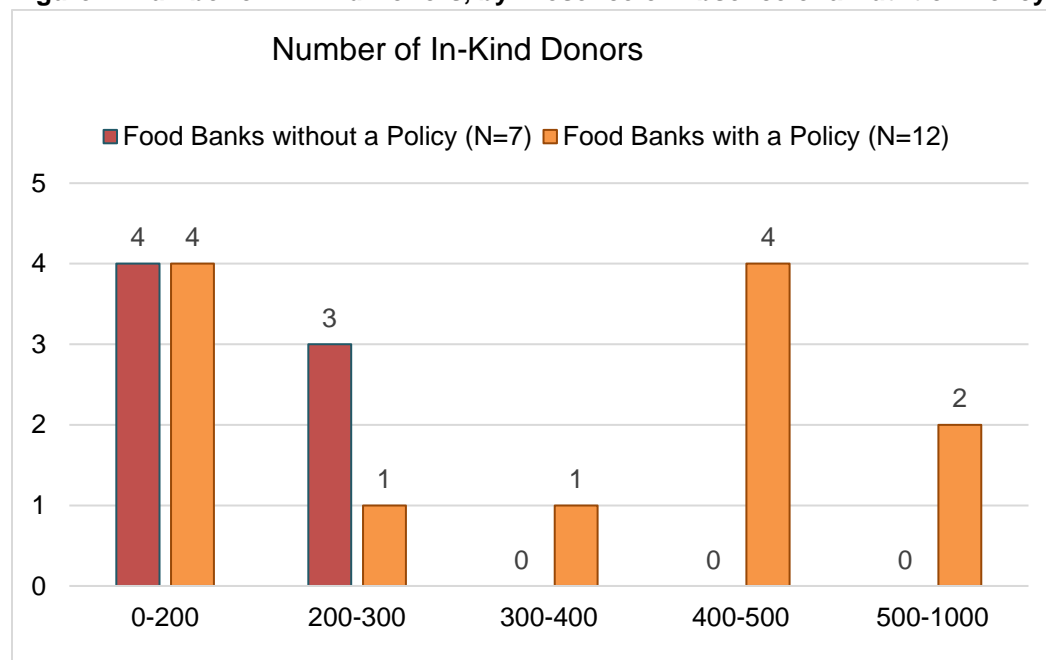
larger service areas, intermediate level of food insecurity, intermediate amount of resources, and intermediate to high cost to operate, while two more belonged to the Pineapple, Strawberry, and Watermelon group with smaller relative service area size, intermediate level of food insecurity, low to intermediate level of resources, intermediate to high cost to operate.

4.2 Donor and Donation Characteristics

Our survey collected information about donors and donations from all survey respondents. Our sample reported a wide range in the number of donors, from just 15 to approximately 1,000. The median number of food donors was 300, which is more than double the number of donors reported by the Food Bank of Western Massachusetts.

Figure 2 shows the variation in the total number of donors that food banks reported among food banks with and without nutrition policies in place. Eight food banks reported fewer than 200 donors and only two food banks reporting more than 500 donors. The distribution suggests that food banks with fewer donors are less likely to have written nutrition policies, while food banks with more donors are more likely to have nutrition policies. It is possible that food banks with fewer donors are more concerned about the impact that a nutrition policy could have on their relationship with, and support from, those donors since any loss of donors could impair that bank's ability to receive sufficient donations.

Figure 2. Number of In-Kind Donors, by Presence or Absence of a Nutrition Policy



The survey also collected information about donors' participation in the food bank's activities, finding that 87% of respondents have donors who participate as board members, and

94% of respondents indicated that donors also participate in other ways, such as holding fundraisers or volunteering. Donors' participation in food banks' activities, and their involvement in banks' decision-making processes, may complicate the process of implementing a nutrition policy or hinder food banks' ability to create stringent nutrition policies.

Next, the survey asked respondents to estimate the percentage of donations made by different types of donors that are considered healthy. Figures three and four show the percentage of healthy donations received from donors with a national, regional, and local presence. Figure three shows the results for food banks with nutrition policies, while figure four shows the same information for food banks without nutrition policies.

Among food banks with nutrition policies, respondents estimated that a greater percentage of donations from national donors were healthy, while a smaller percentage of donations received from local donors were healthy. Interestingly, among food banks without nutrition policies, these trends reversed. Respondents in figure four estimated that donations from local donors were the healthiest, while a much smaller percentage of donations received from national donors were healthy. Although the small sample size limits the conclusions we can draw from the results, it is possible that food banks without nutrition policies have not implemented policies because they have already cultivated strong relationships with local donors in order to increase the amount of healthy foods received and meet or exceed their internal healthy foods target.

Figures 3 and 4: Percentage of Healthy Donations Provided by National, Regional, and Local Donors

Figure 3.

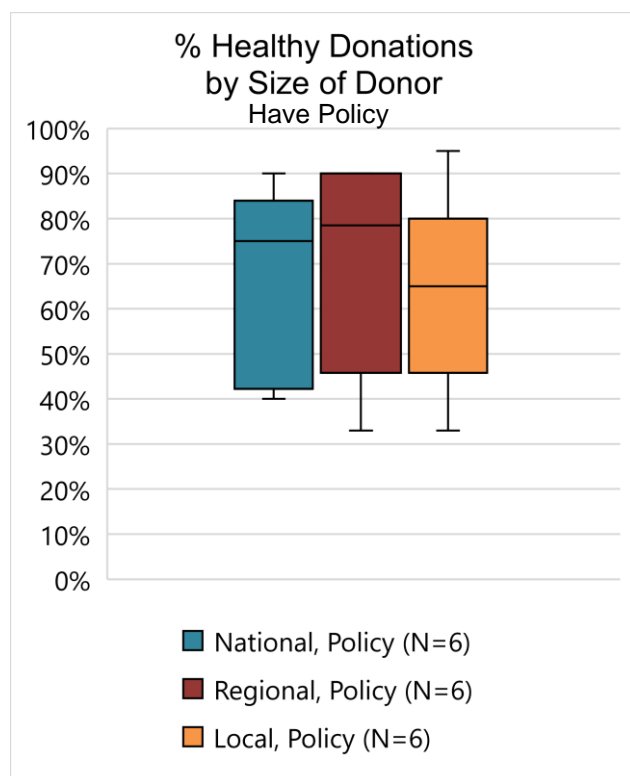
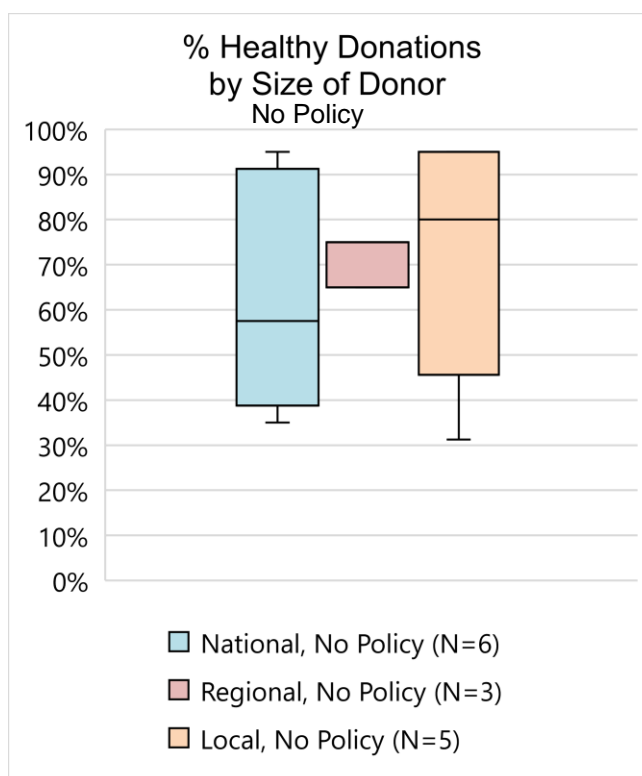


Figure 4.



4.3 Challenges for Food Banks Without Nutrition Policies

Six survey respondents did not have nutrition policies. These banks were asked what barriers stood in the way of forming a nutrition policy. The most cited barrier was reaching consensus among the leadership of the food bank on the details of the nutrition policy, suggesting that while internal stakeholders may buy into the need for a nutrition policy, they may anticipate difficulty in the policy creation process itself. This difficulty in policy creation and process included the lengthy period of creating an effective policy and the costs associated with this process. Anecdotally, one concern related to this challenge was of creating a policy that was too prescriptive, and that restricted clients' food choices without their input. Another important point of potential disagreement is on whether the nutrition policy should indicate that the bank will reject unwanted donations.

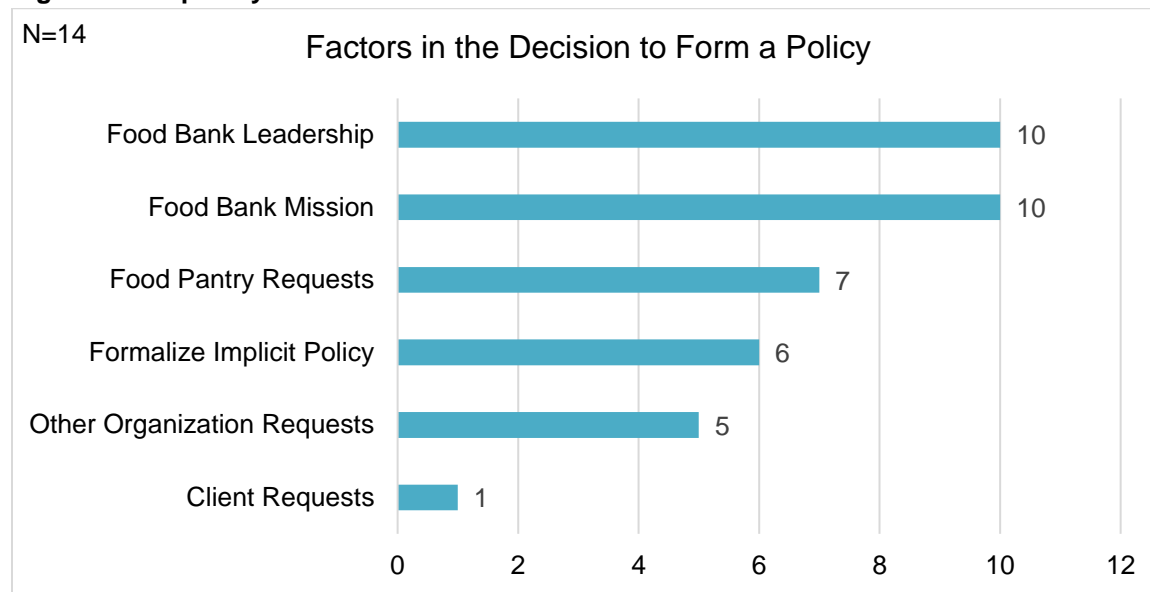
This leads into another common barrier expressed by respondents, which was concern about the impact of a nutrition policy on donor relationships. In-kind donors may also make financial donations, so that a policy with a negative impact on donor relationships could decrease food donations and cause a loss of financial donations.

4.4 Nutrition Policy Motivation

Food banks reported two types of motivations to implement nutrition policies. The top-cited reasons for forming a policy were internal factors: food bank leadership (71%) and the food bank's mission (71%). To illustrate the importance of these internal factors, the single food bank that no longer implemented its nutrition policy had undergone a change in leadership since creating the policy. With the new Executive Director focused on increasing pounds of donations, the nutrition policy was put aside. However, the respondent expects to implement that policy again in the future once the Executive Director has made progress toward the new distribution goals.

Food banks also cited several external factors that influenced their decision to form a nutrition policy. Seven food banks (50%) responded that food pantry requests had requested a nutrition policy, while five food banks (36%) said that other community organizations had requested the change, and one food bank (7%) said that clients had requested healthier foods.

Figure 5. Frequency of Factors that Motivated Food Banks' Decisions to Form a Nutrition Policy



Eleven food banks reported that the decision to create a nutrition policy was made by food bank leadership. Only two respondents indicated that food bank staff initiated the process. In one case, the food bank's nutrition educators initiated the process of forming the nutrition policy after learning from a client that contrary to the advice they were giving, he had been able to obtain soda from their mobile food bank earlier that day.

4.5 Nutrition Policy Formation Process

Food banks were asked several questions about the details of their policy formation process. One common theme that emerged among food banks with nutrition policies was that the policies had been formed by working groups comprised largely of internal stakeholders. Working groups often included food bank leaders at the Director or Executive level, most often the Director of Operations. Committees nearly always included staff from several departments, such as nutrition education, operations, food sourcing, programs, and marketing or communications. Several banks also included representatives from their largest member agencies, dietitians from nearby universities, food bank board members, and representatives from other community organizations. Table one contains a sample of nutrition policy working group members reported by respondents.

Table 1. Nutrition Policy Working Group Members

Food Bank ID	Number of people in the working group	Which positions did these people hold inside or outside of the organization?
OP-1	9	VP Operations, nutrition educator, purchaser, sourcing manager, development team member, agency services, communications manager, child hunger programs
AM-2	4	Two nutrition educators, dietetic intern from nearby university, and Director of Agency Services & Nutrition
A-3	3	Nutrition team and distribution services team
B-3	7	Chief Program Officer, Director of Community Health and Nutrition, Director of Agency Services, Director of Operations, Food Sourcing Manager, Community Relations Director, Partner Agency Executive Director

Out of fourteen respondents, six food banks indicated that their nutrition policy working groups did not experience differences of opinion, while eight reported that there were differences of opinion within the committee. This suggests that nutrition policy working groups create policies using one of two strategies: reaching consensus beforehand or assembling a diverse group and welcoming discussion throughout the policy creation process. Food banks that did encounter disagreement within the committee indicated that if consensus could not be reached through discussion, the disagreement was elevated to a Vice President or Executive Director for a decision, or the item was left out of the policy.

4.6 Nutrition Policy Implementation

Nutrition policy implementation varies widely due to nonuniform administrative processes in the sector. Food banks reported a number of different methods for tracking the nutritional quality of foods received and distributed by their warehouses. Most tracking systems require barcode scanning and detailed reporting of pounds of food received and distributed. Of the eleven food banks with policies that belong to the Feeding America network, seven reported using Feeding America's Foods to Encourage (F2E) broad categories system. Of the fourteen food banks with policies, ten reported using another system, either in place of or in addition to F2E. These included the Choosing Healthy Options (CHOP) system, which is popular in the charitable food sector, but also included systems that food banks themselves had created. These differences in measurement underlie the variety observed in the fourteen nutrition policies. While some nutrition policies set concrete targets for future distribution levels of healthy foods, others are broader and set no targets. For example, one policy aims simply to decrease the salt and sugar distributed while increasing fiber.

4.7 Nutrition Policy Communication and Feedback: Internal Stakeholders, Member Agencies, and Clients

Food banks were asked to specify how they communicated their policies to internal stakeholders, member agencies, and clients. The most frequently mentioned methods for communicating with internal stakeholders were informal conversations, in-person meetings, and staff representation on the nutrition policy committee. Respondents emphasized the utility of face-to-face conversations with internal stakeholders because they offer the opportunity to ask questions. Formal methods of communication were rarely used with internal stakeholders, and only two food banks distributed surveys to internal stakeholders, while only three held focus groups to solicit feedback.

Food banks described a variety of ways they communicated the nutrition policy to member agencies, which typically involved mentioning the policy in regular newsletters, trainings, and events. Only six out of thirteen respondents solicited feedback from member agencies after implementing the nutrition policy. Again, informal conversations and in-person meetings were used most frequently, with only two food banks distributing a formal survey.

Because food banks typically distribute food through member agencies, most food banks replied that they did not communicate with clients about their nutrition policies. However, at one food bank where some clients do come in to shop, staff placed a banner on the shop floor to communicate their nutritional policy to both clients and member agencies.

4.8 Nutrition Policy Communication and Feedback: Donors

Very few food banks communicated their nutritional policy to donors. However, when they did communicate to donors, the modes of communication were informal and unique to the bank. Factors like, the number of donors that a food bank has or the motivation for a nutritional policy did not play a role in how food banks communicated with their donors. Rather, food banks based the decision to communicate with donors on varying degrees of how comfortable and how well equipped internal stakeholders felt about this communication. Nonetheless, the preferred method of communication by most banks that communicated to donors, was email and phone calls.

Of the six food banks that communicated to donors, only two food banks solicited feedback from donors. These two banks did not use formal modes of communication to track and store donor input. Rather, they used in person meetings and email to gain donor feedback.

Regardless, of two food banks' initiative to solicit feedback from donors, five banks reported experiencing donor pushback. Three of the five banks reported donor discontent from big donors while one bank mentioned donor discontent from a small donor and another bank mentioned donor discontent from a combination of large and small donors.

Surprisingly, geographic locations of food banks that had donor push back revealed if these banks would lose donors. Four of the five food banks that experienced donor discontent were located in urban areas and lost a higher numbers of donors than the one rural food bank. These

urban food banks reported twenty to five percent loss of donors. Two urban food banks with a higher loss in donors, approximately twenty to ten percent, reported that donors felt the nutritional policy to be an unexpected change to years of accepting all forms of food. For this reason, these donors decided to donate elsewhere. Urban food banks that had a lower percentage of lost donors, used public health partnership and publicity to motivate their adherence to a nutritional policy. Interestingly the one rural food bank, of the five that experienced donor discontent, covered a large rural geographic area and did not lose donors. This food bank had one donor that contacted Feeding America to complain about the bank's implementation of a nutritional policy, but the donor did not leave.

Eight out of fourteen food banks indicated that they did not communicate the policy to donors, or that they communicated only on an as-needed basis. In those cases, members of the food acquisitions team typically communicated with donors to let them know about a donation that was not in line with the policy. There were several factors associated with food banks not communicating their nutritional policy to donors, one of which was the formalization of existing best practices that did not change donor relationship or have material impact on the way the bank interacted with donors, while another was food banks' goal to internally increase healthy foods without restricting donors who typically did not donate unhealthy foods. Additionally, some banks had not communicated to donors because they had not yet decided on a communication strategy.

4.9 Incentivizing Donors

None of the food banks with nutrition policies indicated that they incentivize donors to comply with the policies. When asked what incentives they would be able to offer to donors, two respondents indicated that could include the names of donors who made extensive contributions of healthy foods in new marketing campaign, one food bank suggested that they could describe the healthy donation on social media, and lastly one food bank described the possibility of naming donors who made large contributions of healthy foods at fundraising events.

4.10 Impacts of Nutrition Policy on Donors and Donations

No respondents indicated that they had fewer in-kind donors after implementing a nutrition policy. Figures six and seven show the difference in the impacts of nutrition policies among food banks that do reject unwanted donations and food banks with policies that do not reject donations. Figure six shows that in all cases, regardless of whether the food bank rejects donations, the number of donors food banks had after implementing a nutrition policy was the same or higher.

Figure 6. Number of Donors Reported After Implementing Nutrition Policies

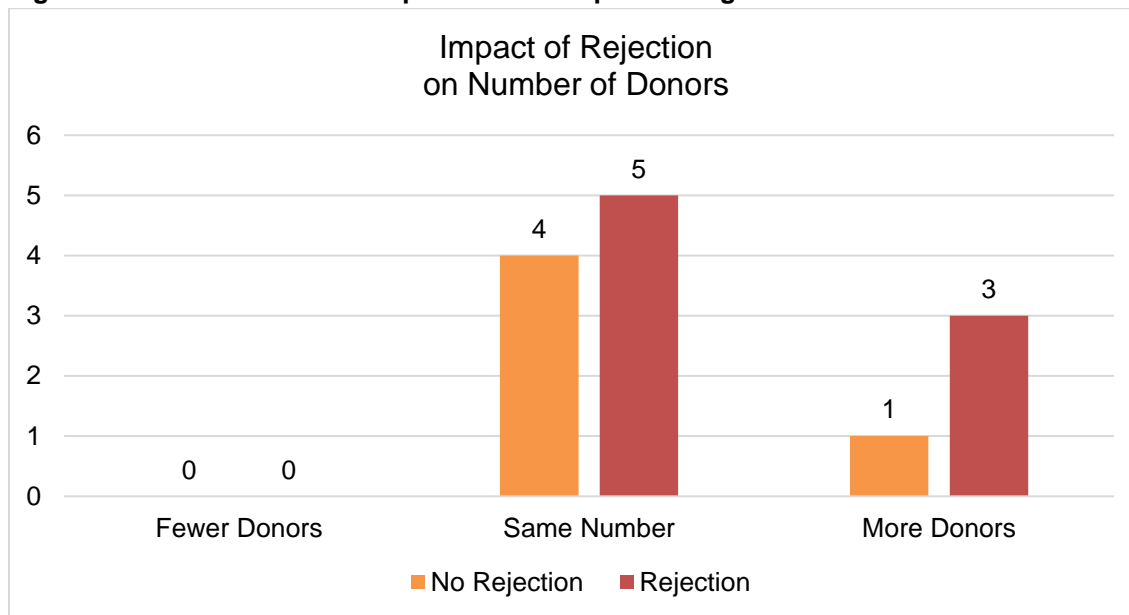
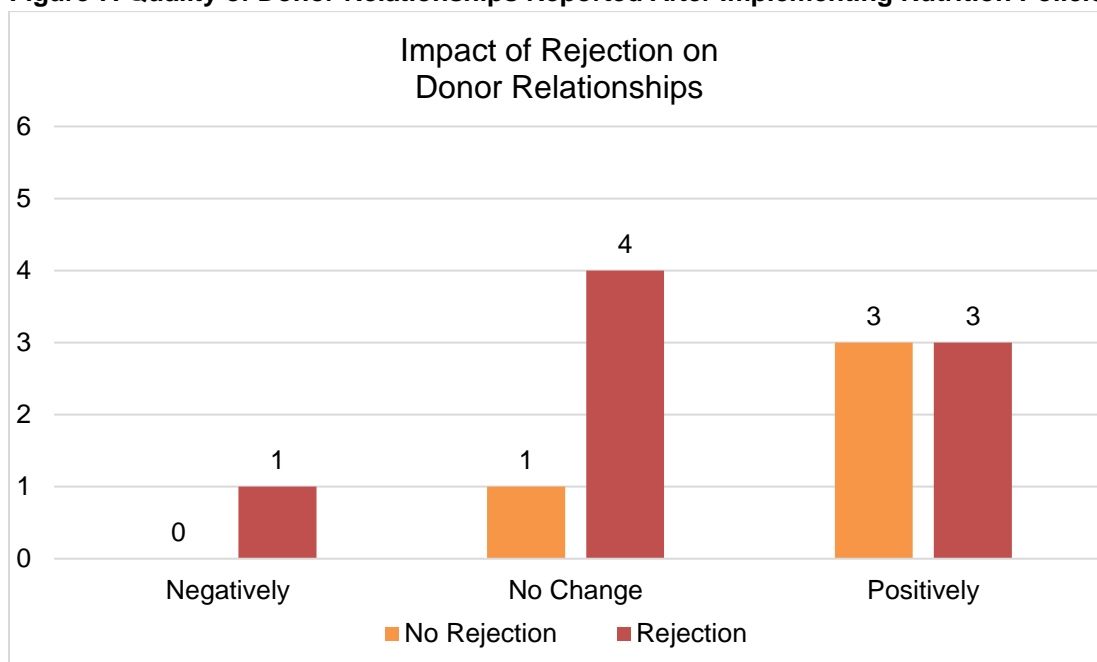


Figure seven shows that one respondent, whose food bank does reject unwanted donations, indicated that the nutrition policy resulted in a negative impact on donor relationships. This respondent met with two national donors to communicate the food bank's intention to reject donations of soda. As a result, both national donors halted food and financial donations to the food bank. However, figure seven also shows that six food banks fell on the other end of the spectrum, seeing improved donor relationships after implementation of the nutrition policy.

Figure 7. Quality of Donor Relationships Reported After Implementing Nutrition Policies



Respondents provided several examples of how improvements in donor relationships were achieved. One food bank explained that the nutrition policy provided an opportunity to "encourage good behavior from critical partners." Their use of positive reinforcement improved the quality of their donor partnerships. Another food bank said that the nutrition policy yielded new donors, including foundations and insurance companies focused on public health. These new donors were interested in providing financial donations, volunteering, and holding fundraisers for the food bank. Finally, one respondent indicated that their local public health department recognized the food bank as a partner for the first time, showing that the nutrition policy created an opportunity for capacity building in the community.

4.11 Policy Evaluation

No respondents conducted formal policy evaluations using qualitative or quantitative measures specifically designed for the task. Three respondents out of fourteen indicated that they conducted an evaluation of their nutrition policy. In one case, this evaluation was an informal review conducted by the nutrition policy working group, while in the second case the food bank's board discussed only whether the policy was still relevant. In the third case, however, the food bank's programming staff used the percentage of Foods to Encourage (F2E) that had been distributed pre- and post-implementation as a measure of success. Several food banks set specific targets for increasing the percentage of healthy foods they distribute in years to come, and these banks already have measurement systems in place to generate this information.

6. Discussion

We found that food banks without policies were more likely to have fewer donors than food banks with policies. Of the fourteen food banks with policies, thirteen used working groups to create their food policy. All working groups involved internal food bank staff, and most included food bank leaders at the director or executive level. Some working groups included external stakeholders like dietitians from nearby universities, board members, and representatives from member agencies and other community organizations. Working groups took one of two strategies to create a policy: either build consensus before beginning to write the policy or gather a group with differing opinions and have a discussion as they wrote the policy.

Similarly, working groups produced policies that used one of two strategies to limit unhealthy food donations: either rejecting unwanted donations or accepting all donations and disposing of unwanted donations. The decision to reject or not reject donations was not associated with a negative impact on donor relationships or amounts of food donated. In fact, the amount of food and the quality of food donated were typically reported to have increased after

implementation of the policy, although respondents emphasized that they do not view these impacts as direct results of the nutrition policy.

Respondents with food policies took several different approaches to communicating the nutrition policy to donors, and the variation in their approaches was not associated with any other particular trait, such as the number of in-kind donors. In several cases, food banks did not communicate the policy to donors except on an ad hoc basis, explaining the food bank's priorities only when a donation was rejected. On the other hand, some food bank leaders made specific efforts to notify large donors in person or by phone, while other food banks did not notify large donors and instead focused on communicating priorities to individual donors participating in food drives.

Food banks do not typically conduct formal evaluations of their nutrition policies. Some food banks do use a quantitative measure, gauging the success of their nutrition policies by the percentage of healthy food distributed. However, some food banks choose general rather than specific targets, for example, aiming to decrease their distribution of sugar and salt while increasing fiber. These banks may require alternative measurements to adequately assess their policy's impact. Poor indicators of success include the number of in-kind donors overall and the pounds of food received and donated by the bank because these numbers can fluctuate and be impacted by many factors. However, more robust indicators may be the number and type of new donors, particularly new financial donors with an interest in public health. A related indicator might be increased recognition for the food bank in the public health arena. Creating specific measurements of the composition and quality of foods distributed would also be a positive step for food banks both with and without nutrition policies.

7. Recommendations

Based on our findings, we have developed recommendations that could be implemented in a step by step continuous improvement process. Alternatively, the Food Bank of Western Massachusetts could consider each step as a sole solution if they decide to implement or not implement a nutritional policy:

1. Firstly, the Food Bank of Western Massachusetts could consider not implementing a nutritional policy as it currently exceeds Feeding America's Foods to Encourage targets, which indicates that it is already considered successful by its parent organization. Furthermore, the food bank does not currently receive a large amount of unhealthy donations. In the short run, moving forward without a formal policy would likely not harm the food bank. However, the long-range impact of proceeding without a policy is difficult to predict. The charitable food sector is reliant on donations from large grocers, and if a large donor began giving unhealthier foods to the FBWM, the bank may find itself pressed to create a policy quickly to address the situation. The bank may benefit more from a deliberate and incremental policy creation process now than a rushed process in the future.

2. Therefore, the second step is for FBWM to place great emphasis on selecting the right people to be a part of the nutrition policy committee. These people will be instrumental in convincing stakeholders of the importance of a nutritional policy and help effectively implement the policy.
3. Once this committee is in place, the third step is for the bank to use an incremental establishment of a nutrition policy to create an internal policy around foods eligible for distribution. FBWM would continue to accept all foods donated but would establish standards for distribution and work to minimize waste however possible. Methods can include redirecting contents to farms or compost facilities, like the Compost Cooperative in Greenfield, MA and recycling containers. Benefits of this policy would not change donor relationships and improve the nutritional quality of foods distributed. While the drawbacks would include increased staff and volunteer time in processing foods that cannot be distributed, and potential donor disappointment at the refusal to distribute and the increase in wasted product.
4. The fourth step is to focus on down streaming agencies rather than donor may be a good solution to creating an internal policy. That is, incentivizing member agencies to improve access to healthy foods by expanding their capacity to receive and store it i.e. provide freezers, etc.
5. Step five, is for the bank to formalize existing best practices and communicate this formalization to donors. Since the operations of FBWM is to prioritize fresh produce and protein in the hopes of reaching targeted goals in 2025; formalizing this desire to produce healthy food to member agency, the FBWM could communicate to donors of their need to achieve this goal by prioritizing healthy foods over unhealthy ones in a document.
6. Step six, is to evaluate the reaction of donors when the policy is communicated. If the bank receives too much pushback, the FBWM could work with internal stakeholders in food sourcing and allocation department to prioritize and acquire donors who would donate more healthy foods instead of focusing time communicating a nutritional policy to donors that may not be a priority. This approach would empower the food bank to begin rejecting donations based on nutritional grounds without eroding their donor base and prioritized donor relationships.
7. Step seven would be to develop a good donor relationship with donors while implementing a nutritional policy, the food bank could create a donor education program that is inclusive of a formal communication policy. This formal communication in the donor education program would be a part of a strategic communication approach used to evaluate the effectiveness and impact of a nutritional policy on donors and the organization as a whole.
8. Step eight is for bank to seek opportunities for funding from foundations and other donors who approve of the policy's goal and intent. These the steps would ensure that an effective nutritional policy is implemented while maintaining positive donor relationships.

8. Conclusion

There is no one-size-fits-all nutrition policy for food banks. Reading and hearing about nutritional policies, we found a wide variety of approaches to designing and implementing a policy. Based on geography, existing donor relationships, existing tracking systems, and numerous other factors, food banks have and will continue to create unique nutrition policies with varying levels of complexity. Food banks may draw on resources from MAZON, Feeding America, and the University of California, Berkeley's Nutrition Policy Institute, as well as other food banks' experiences to decide on a strategy and nutrition policy details that build on their key strengths and take steps to improve the nutritional quality of foods they distribute.

Our study found that a nutritional policy had no negative effect on donor relationships. We also found that successful nutritional policies had one factor in common: Food banks with a clear communication strategy to educate internal and external stakeholders about the goals of the policy were likely to have a more effective policy. Focusing the attention of stakeholders on the health of the people served by the food bank reminds stakeholders of what matters, and the underlying motivation for implementing a policy in the first place. Clear communication of this motivation also invites possible new connections with other health-focused organizations.

Finally, nutrition policies are the way of the future, and a well-recognized way that food banks can signal their focus on public health both internally and externally. Though some food banks do not advertise their nutrition policies, these policies represent an important opportunity to communicate a food bank's contribution to both their community's health and broader public health goals. The process of policy formation also presents an opportunity to network with outside experts and leaders in the sector, growing food banks' knowledge base and community capacity.

Bibliography

Bohnert, April. "Meet FoodMaven, the Colorado Startup on a Mission to Eliminate Food Waste in America." Built In Colorado. December 12, 2017. Accessed May 8, 2018. <https://www.builtincolorado.com/2017/12/12/colorado-springs-foodtech-foodmaven>.

Centers for Disease Control. "Adult Obesity Facts." National Center for Chronic Disease Prevention and Health Promotion. March 5, 2018. Accessed May 8, 2018. <https://www.cdc.gov/obesity/data/adult.html>

Feeding America. "Our Network." Accessed May 8, 2018. <http://www.feedingamerica.org/our-work/food-bank-network.html>

Feldman, Marla and Marlene B. Schwartz. "A Tipping Point: Leveraging Opportunities to Improve Nutritional Quality of Food Bank Inventories." MAZON.org. March 2018.

Fisher, Andrew. *Big Hunger: The Unholy Alliance between Corporate America and Anti-Hunger Groups*. Cambridge, MA: The MIT Press, 2017.

Ploeg, Michele Ver, Vince Breneman, Tracey Farrigan, Karen Hamrick, David Hopkins, Phillip Kaufman, Biing-Hwan Lin, et al. "Access to Affordable and Nutritious Food-Measuring and Understanding Food Deserts and Their Consequences: Report to Congress." United States Department of Agriculture, Economic Research Service. June 2009. Accessed May 8, 2018. <https://www.ers.usda.gov/publications/pub-details/?pubid=42729>.

United States Department of Agriculture. "A Short History of SNAP." Food and Nutrition Service. November 28, 2017. Accessed May 8, 2018. <https://www.fns.usda.gov/snap/short-history-snap>

Weinfield, Nancy S, Gregory Mills, Christine Borger, Maeve Gearing, Theodore Macaluso, Jill Montaquila, and Sheila Zedlewski. "Hunger in America 2014." Westat and the Urban Institute. August 2014.

Appendix A: Questionnaire

NUTRITION POLICY QUESTIONNAIRE

Spring 2018

Food Bank Capstone Project

School of Public Policy - University of Massachusetts

Consent cover letter

IF consent cover letter was not sent before the call, please read this speech to kick off each phone interview:

Hello my name is ... and I am part of a graduate student research team from the University of Massachusetts Amherst. We are conducting research on Food Banks' internal nutrition policies in partnership with the Food Bank of Western Massachusetts.

Scope: Over the next two months, our research team will survey 25-30 food banks across the country to learn how food banks design and implement internal nutritional policies. We hope to gather information about best practices that we can present to our local food bank in early May.

Objectives: We have identified three objectives focusing on nutrition policy implementation.

- 1. Our first objective is to identify food classification systems that Food Banks use (such as Foods to Encourage) and examine nutrition policies that are already in place.*
- 2. Our second objective is to learn about how nutrition policies are communicated to donors and stakeholders.*
- 3. Our third objective is to identify any impacts these policies have on donations and donor relations.*

Our questionnaire covers a range of topics including policy implementation, in-kind donor relationships, and characteristics of your organization's in-kind donor base. Therefore, the survey may contain questions that you cannot answer. We may ask your permission to forward some questions along to the appropriate staff person in your organization.

Your participation is completely voluntary. You may decline to answer any questions you do not wish to answer. Your responses will remain confidential and anonymous. No one other than the researchers will know your individual answers to this questionnaire. In our final report, we will refer to food banks only by their Feeding America Environmental Peer Group classification (Apple, Mango, Banana, etc.).

If you are interested in learning about our findings, we will be happy to provide you with a copy of the executive summary of our final report in May. Thank you again for your assistance in this important project.

Contacts

If you have any questions, please contact the School of Public Policy faculty member supervising this project:

Marta Vicarelli, Assistant Professor of Economics and Public Policy
University of Massachusetts, Amherst
mvicarelli@econs.umass.edu

Research team members:

Sarah Brown-Anson, sbrownanson@gmail.com
Elizabeth Leibinger, beth.leibinger@gmail.com
Hadassah Salem, falonemasudi@gmail.com

Would this still be a good time for you to spend a few minutes responding to our survey? Would it be alright with you if we record this interview so that we may make sure we have correctly recorded your answers? (Disclaimer: This survey contains some questions with both open-ended and multiple-choice responses. Our apologies if some questions seem repetitive and thank you in advance for your patience!)

---,---

IF Consent cover letter was sent previously via email, use this alternative introduction:

Thank you again for agreeing to speak with us today. Would it be alright with you if we record this interview so that we may make sure we have correctly recorded your answers?

As a reminder, our questionnaire covers a range of topics including policy implementation, in-kind donor relationships, and characteristics of your organization's in-kind donor base. Therefore, the survey may contain questions that you cannot answer. If there are any questions you cannot answer, we may ask your permission to forward some questions along to the appropriate staff person in your organization.

Your participation is completely voluntary. You may decline to answer any questions you do not wish to answer. The questionnaire is designed to take around 30-40 minutes, but that may vary. It contains some questions with both open-ended and multiple choice responses. Our apologies if some questions seem repetitive, and thank you in advance for your patience!

After reading more about our project in the email I sent, do you have any questions before we get started?

SURVEY

DATE:

Start-Time:

End-time:

Was the survey completed?

ORGANIZATION:

RESPONDENT:

CONTACT:

SURVEYORS (check the names that apply):

- ☐ Sarah Brown-Anson, sbrownanson@gmail.com
- ☐ Elizabeth Leibinger, beth.leibinger@gmail.com
- ☐ Hadassah Salem, falonemasudi@gmail.com

NOTES:

DONOR RELATIONSHIP & DONATION CHARACTERISTICS

The first questions are about the donors that donate food items to your food bank. If you do not have the answers at hand, I would be happy to email them to you after the call.

1.	How many in-kind food donors do you have?	
	<i>Potentially preface this section with something to the effect of ((We can always check back in on these answers via email, but please, if you're comfortable, answer off the top of your head))</i>	
2.	What percentage of your donors are: 2_1 Retail 2_2 Manufacturers 2_3 Farm	<input type="text"/> Retail <input type="text"/> Manufacturers <input type="text"/> Farm
	((Now we're going to ask you about geographic footprint of your donors:))	
3.	What percentage of your donors are: 3_1 Donors with a national presence 3_2 Donors with a regional presence 3_3 Donors with a local presence	<input type="text"/> National <input type="text"/> Regional <input type="text"/> Local
4.	What percentage of your donations do you receive from: 4_1 Donors with a national presence 4_2 Donors with a regional presence 4_3 Donors with a local presence	<input type="text"/> National <input type="text"/> Regional <input type="text"/> Local
	Now we're going to focus on the proportion of healthy food in your donations, and the origin of that healthy food: <i>Follow up with something like ((It's unlikely that you'll have these figures, but it would be immensely helpful to us to learn what leverage small donors have versus large donors, we can maybe follow up with you by email))</i>	

5_1	What percentage of your donations from donors with a national presence do you consider healthy?	
5_2	What percentage of your donations from donors with a regional presence do you consider healthy?	
5_3	What percentage of your donations from donors with a local presence do you consider healthy?	
6.	On average, how long-standing are your donor relationships?	
7.	What is the length of your longest-standing donor relationship (in years)?	
8.	Is it part of your organization's goals to increase the number of donors annually? <i>(This question is intended to be an indicator of dynamic/growth vs established/stable, both in organization overall & donor dept)</i>	<input type="checkbox"/> yes <input type="checkbox"/> no
9.	Do you receive more regularly scheduled donations or more ad hoc donations?	<input type="checkbox"/> more scheduled donations <input type="checkbox"/> more ad hoc donations
10.	Do donors participate as board members in your organization?	<input type="checkbox"/> yes <input type="checkbox"/> no
11.	Do donors find other ways to support your organization? (Open-ended)	<input type="checkbox"/> yes <input type="checkbox"/> no
11_1	If yes, elaborate:	

NUTRITION POLICY DESIGN PROCESS and GOALS

12. Does your organization have an internal policy in place to regulate acceptable donations on nutritional grounds?

1.	Yes, currently have policy		[Continue to question 15, page 8]
2.	No, never had a nutrition policy		[Continue to question 14]
3.	Yes, previously had policy, no longer in effect		[Continue to question 13]

SCENARIO 2: Option 12C: “had nutrition policy that is no longer being used”

13. What factors contributed to your organization’s decision to reverse the nutrition policy?

[\[CHECK ALL THAT APPLY\]](#)

1.	Too difficult to implement. There were insurmountable organizational challenges.	
2.	Policy was suppressed after a change in leadership at the food bank	
3.	Policy was successfully implemented but did not create the desired change. (i.e. policy not effective)	
4.	Policy generated problems in donor relationships. Compromised relationships with donors.	
5.	Policy negatively affected the size of donations received. (i.e. reduction in donations)	
6.	OTHER	

Instruction to surveyor: Continue to Question 15 and complete the survey

Notes: [\[you may ask respondents if they wish to elaborate on each of the items checked above\]](#)

SCENARIO 3: Option 12B: “never had a nutrition policy”

14_1.	<p>Has your organization begun considering implementing a nutrition policy?</p> <p>a. Yes, we are currently in the process of designing/ implementing a policy</p> <p>b. Yes, we have been exploring the possibility of designing a policy but you have decided not to implement it yet</p> <p>c. No, we have not considered implementing a policy yet</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p>
14_2	<p>If yes to 14_1 a, you are currently in the process of designing a policy and trying to implement a policy. What challenges are you facing? [CHECK ALL THAT APPLY]</p> <p>a. Reaching consensus among organization leadership on whether to make nutrition policy</p> <p>b. Receiving support from all ranks in the organization</p> <p>c. Acquiring knowledge on how to design a policy</p> <p>d. Reaching consensus among organization leadership on the details of the nutrition policy</p> <p>e. Difficulties in the implementation/actualization of the policy</p> <p>f. Concern about possible reduction in amount of donations</p> <p>g. Concern about relationships with donors</p> <p>h. Other</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p> <p>d. ____</p> <p>e. ____</p> <p>f. ____</p> <p>g. ____</p> <p>h. ____</p>
14_3	<p>If yes to 14_1 b, you have been exploring the possibility of designing a policy but you have decided not to implement it yet, what factors contributed to your decision? [CHECK ALL THAT APPLY]</p> <p>a. Lack of consensus among organization leadership on whether to make nutrition policy</p> <p>b. Lack of knowledge on how to design a policy</p> <p>c. Lack of consensus among organization leadership on the details of the nutrition policy</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p>

	d. Concern about implementation costs of a policy (it might be too complicated or time consuming to implement) e. Concern about possible reduction in amount of donations f. Concern about relationships with donors g. Other	d. ____ e. ____ f. ____ g. ____
14_4	<p>If answer is no to 14_1 c, you have not considered implementing a policy yet. Why not? (Check all that apply)</p> a. Lack of interest/desire b. Lack of consensus among organization leadership on whether to make nutrition policy c. Lack of knowledge on how to design a policy d. Lack of consensus among organization leadership on the details of the nutrition policy e. Concern about implementation costs of a policy (it would be too complicated or time consuming to implement) f. Concern about possible reduction in amount of donations g. Concern about relationships with donors h. other	a. ____ b. ____ c. ____ d. ____ e. ____ f. ____ g. ____ h. ____

Additions to Scenario 3:

15_1	Do you actively screen food and prioritize healthy foods even without official food policy?	____ yes ____ no
15_2	What system do you use to identify healthy foods?	
15_3	Do you communicate to donors their preferences for healthy foods?	____ yes ____ no
15_4	How do you communicate those preferences?	
15_5	Do donors respect your preferences?	____ yes ____ no

15_6	Are you concerned you might lose donors when you express your preference for healthy foods?	<input type="checkbox"/> yes <input type="checkbox"/> no
15_7	Do you ever reject donations?	<input type="checkbox"/> yes <input type="checkbox"/> no
15_8	If you do not reject donations, what do you do with the food you do not want? (e.g. it goes to goats in the case of the Redwood Empire FB)	

Instruction to surveyor: Ask if they have anything else to add, then ask permission to follow up, then Scenario 3 survey is complete.

Notes: [you may ask respondents if they wish to elaborate on each of the items checked above]

SCENARIO 1 - CURRENTLY HAS NUTRITION POLICY

16.	Why did you implement a nutrition policy? (open-ended)	
17.	<p>Select all the factors that influenced your organization's decision to implement a nutrition policy: [CHECK ALL THAT APPLY]</p> <p>a) Food pantries' requests b) Other community organizations' requests c) Individual clients' requests d) Food Bank's mission (desire to do more to help ensure that clients receive mostly healthy foods) e) Food Bank leadership (desire to improve distribution of healthy foods) f) Formalize existing implicit policy</p>	<p><i>Reminder: Yes/No for each</i></p> <p>a. ____ b. ____ c. ____ d. ____ e. ____ f. ____</p>
18.	<p>Are you able to share your nutrition policy document with us?</p> <p>1. Yes 2. No</p>	<p>____ yes ____ no</p>

POLICY IMPLEMENTATION

The next few questions are about how the nutrition policy is implemented.

20_1.	Do you use Feeding America's 'Foods to Encourage' (F2E) broad category guidelines to evaluate whether food is "healthy" or "unhealthy"?	<input type="checkbox"/> yes <input type="checkbox"/> no
20_2.	Do you use Feeding America's 'Foods to Encourage' (F2E) detailed category guidelines?	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not applicable
20_3.	Do you have another system in place of or in addition to F2E?	<input type="checkbox"/> yes <input type="checkbox"/> no
20_4.	If yes, can you describe the other system? (open-ended)	
20_5.	Which system is most important to your organization? a) No system b) Foods to Encourage c) Your own classification system d) Not sure	a. <input type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/> d. <input type="checkbox"/>

Notes:

COMMUNICATION AND FEEDBACK FROM STAKEHOLDERS [GO FAST, YES/NO]

Now I'm going to ask you a few questions about how organization communicate about the new nutritional policy with internal stakeholders, member agencies, clients or recipients, and donors.

21_1	Was the decision to create a nutrition policy fueled more by the top leadership of the food bank or more by staff members? (In other words, was it top-down or bottom-up?)	<input type="checkbox"/> top-down <input type="checkbox"/> bottom-up
21_2.	Could you expand on who contributed to the original proposal? (in other words who initiated the process?)	
21_2_1	How many people worked on the policy proposal?	
21_2_2	Which positions did these people hold inside or out of the organization?	
21_2_3	If you recall -- were there differences in opinion among those who initially developed the policy?	<input type="checkbox"/> yes <input type="checkbox"/> no
21_2_3a	If you answered yes, could you let us know how the differences in opinion were solved?	

21_3.	<p>After the initial design of the policy and before its implementation -- Did you use any of the following methods to discuss the new nutrition policy proposal with internal stakeholders? (<i>Internal stakeholders means staff, volunteers, board & others inside the organization</i>)</p> <p>[CHECK ALL THAT APPLY]</p> <ul style="list-style-type: none"> a) Staff meetings b) Survey c) Focus groups d) Informal conversations e) Staff representation on committee to form nutrition policy f) Other (describe) 	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p> <p>d. ____</p> <p>e. ____</p> <p>f. ____</p>
21_3f	If selected f) Describe	
21_4.	Which was the most useful/effective method you used to communicate with (and receive feedback from) internal stakeholders?	

INCENTIVES for DONORS and IMPLEMENTATION DESIGN

29_1.	<p>Donors may face additional costs when they are required to screen their donations to eliminate unhealthy foods. Did your organization introduce any incentive for donors to encourage their compliance with your new food policy?</p> <ul style="list-style-type: none"> a) Yes b) No 	<p>____ yes</p> <p>____ no</p>
29_2.	<p>IF NO</p> <p>Let's think about hypothetical scenarios. What incentives if any do you think your organization could design to incentivize donors to follow your nutritional policy (and thereby improve the proportion of healthy foods donated)? (open ended)</p>	

29_3.	IF YES What incentives if any did your organization design? (open ended)	
30.	Which department was responsible for designing these incentives? (ask for contact person)	
31.	<p>Did your organization use any of the following strategies to incentivize healthy donations? [SELECT ALL THAT APPLY]</p> <p>a.) Indicating in new marketing campaign the names of donors who made extensive contributions of healthy foods?</p> <p>b.) Naming donors who supported the new healthy food policy campaign and describe their generous donations in new marketing campaign</p> <p>c.) Naming donors who made extensive contributions of healthy foods during fund raising events</p> <p>d.) Organized special gala or other fundraising event</p> <p>e.) Additional tax benefits</p> <p>f.) Other (describe))</p>	<p>a. _____</p> <p>b. _____</p> <p>c. _____</p> <p>d. _____</p> <p>e. _____</p> <p>f. _____</p>
32.	Let's think about hypothetical scenarios. What additional incentives if any do you think your organization could design to incentivize donors to follow your nutritional policy (and thereby improve the portion of healthy foods donated)? (open ended)	

Notes:

IMPACTS OF NUTRITION POLICY ON DONATIONS

Next I'm going to ask about the impacts of the policy on the foods donated to your food bank.

33.	Besides feedback, how has this policy practically impacted your donations, in terms of pounds of food and types of food donated? (Open-ended)	
34.	<p>Since implementing your policy, have you seen any of the following changes in the quantity of your donations: [SELECT ALL THAT APPLY]</p> <p>a.) An increase in the amount of healthy foods donated?</p> <p>b.) A decrease in the amount of healthy foods donated?</p> <p>c.) An increase in the amount of unhealthy foods donated?</p> <p>d.) A decrease in the amount of unhealthy foods donated?</p> <p>e.) No change</p> <p>f.) Other (describe)</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p> <p>d. ____</p> <p>e. ____</p> <p>f. ____</p>
35.	<p>Since implementing your policy, have you seen any of the following changes in the quality of your donations: [SELECT ALL THAT APPLY]</p> <p>a.) An increase in the quality of healthy foods donated?</p> <p>b.) A decrease in the quality of healthy foods donated?</p> <p>c.) An increase in the quality of unhealthy foods donated?</p> <p>d.) A decrease in the quality of unhealthy foods donated?</p> <p>e.) No change</p> <p>f.) Other (describe)</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p> <p>d. ____</p> <p>e. ____</p> <p>f. ____</p>
We have a few questions about your targets:		
36_1.	Had you exceeded Feeding America's F2E target before implementation?	<p>____ yes</p> <p>____ no</p>

36_2.	Did you set other targets for decreasing unhealthy foods before/after implementation?	<input type="checkbox"/> yes <input type="checkbox"/> no
36_3.	Did you meet/exceed your targets after implementation of the nutrition policy?	<input type="checkbox"/> Met targets <input type="checkbox"/> Exceeded targets <input type="checkbox"/> Did not meet targets
36_4.	Why do you think that happened? (open-ended)	
37_1.	Since implementing your policy, have you declined any donations on nutritional grounds?	<input type="checkbox"/> yes <input type="checkbox"/> no
37_2.	Who notified the donor of a rejected donation?	
37_3.	What was the donor's response?	
38.	<p>How has this policy impacted your relationships with donors over time?</p> <p><i>[Note: there may be donors that initially pushed back but that over time embraced the new policy and maintained a productive relationship]</i></p>	<input type="checkbox"/> Positively impacted <input type="checkbox"/> Negatively impacted <input type="checkbox"/> No change
39.	<p>Since implementing your policy, do you have:</p> <ol style="list-style-type: none"> 1. more donors 2. fewer donors 3. the same number of donors 	<input type="checkbox"/> More <input type="checkbox"/> Fewer <input type="checkbox"/> Same number

EVALUATION PROCESS

The last section asks about your organization's evaluation of the nutritional policy.

40_1.	Have you conducted a formal evaluation of the nutrition policy?	<input type="checkbox"/> yes <input type="checkbox"/> no
40_2.	Which parts of your organization were involved in creating the evaluation?	
40_3.	What quantitative measures were used to determine success?	
40_4.	Can you share the results of your evaluation?	<input type="checkbox"/> yes <input type="checkbox"/> no
41_1.	Have you made any revisions to the policy based on evaluation, feedback, or unexpected impacts?	<input type="checkbox"/> yes <input type="checkbox"/> no
41_2.	If yes, can you describe any changes?	

((Now we are going to ask you a few questions about how the policy was received by your organization's stakeholders, in particular how it was communicated to them and how you received feedback?))

	DONORS	
27_1.	How did you communicate the policy to donors?	
27_2.	Which parts of your organization were involved in communicating the policy to donors?	
27_3.	Did you use any of the following methods to communicate the new nutritional policy to donors? a) In-person meetings b) Mailed letters	a. _____

	c) Email d) Phone call e) Event f) Other (describe)	b. ____ c. ____ d. ____ e. ____ f. ____
27_4.	Which was the most important method you used to communicate the policy to donors?	
28_1.	Did you solicit feedback on the nutrition policy from donors? a) Yes b) No	____ yes ____ no
28_2.	Did you solicit feedback from donors through any of the following methods? a) In-person meetings b) Questionnaire c) Phone call d) Email e) Other (describe)	a. ____ b. ____ c. ____ d. ____ e. ____
28_3.	What type of feedback did you receive?	____ Positive ____ Negative ____ Combination
28_4.	Did you experience any form of pushback from some donors about the new policy? a) Yes b) No	____ yes ____ no
28_5.	What percentage of your donors manifested discontent?	
28_6.	Did pushback come mostly large or small donors? a) Large b) Small c) Combination	____ Large ____ Small ____ Combination

		___ N/A
28_7.	How did donors manifest their discontent? (open-ended)	
28_8.	Did you receive any positive feedback and support? 1. Yes 2. No	___ yes ___ no
28_9.	Did you receive positive feedback and support from mostly large or small donors? a) Large b) Small c) Combination	___ Large ___ Small ___ Combination ___ N/A

	INTERNAL STAKEHOLDERS: <i>(Internal stakeholders means staff, volunteers, board & others inside the organization)</i>	
22_1.	Feedback during initial implementation (Pilot Phase) -- After the nutrition policy was designed, did you solicit feedback from internal stakeholders during the initial implementation of the policy (in other words was there a pilot phase to improve the design/implementation)? a) Yes b) No	___ yes ___ no
22_2.	Did you solicit feedback through any of the following methods? [CHECK ALL THAT APPLY] a) Staff meetings b) Survey c) Group meetings (eg. focus groups) d) Informal conversations e) Staff representation on committee to form nutrition policy f) Other (describe)	a. ___ b. ___ c. ___ d. ___ e. ___ f. ___

22_2f	If selected f) Describe	
22_3.	Did you receive useful feedback to improve the policy implementation? a) Yes b) No	<input type="checkbox"/> yes <input type="checkbox"/> no
22_4.	Overall, was the response you received positive, negative, or a combination?	<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Combination
22_4_1	If you received any negative feedback, could you elaborate and describe how the conflict was solved?	
	MEMBER AGENCIES	
23_1.	How did you communicate the new nutrition policy to member agencies? <i>(Member agencies are food pantries, community meal programs, shelters, and group homes that order and distribute food from the food bank. - Definition from Feeding America's FoodLifeline.org)</i>	
23_2.	Did you use any of the following methods to communicate the new nutrition policy to member agencies? [CHECK ALL THAT APPLY] a) In-person meetings b) Mailed letters c) Email d) Phone call e) Event f) Other (describe)	a. <input type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/> d. <input type="checkbox"/> e. <input type="checkbox"/> f. <input type="checkbox"/>
23_3.	Among the methods you listed, which was the most useful/effective method you used to communicate the policy to member agencies?	

24_1.	<p>Did you solicit feedback on the nutrition policy from member agencies?</p> <p>a) Yes</p> <p>b) No</p>	<p>___ yes</p> <p>___ no</p>
24_2.	<p>Did you solicit feedback through any of the following methods?</p> <p>[CHECK ALL THAT APPLY]</p> <p>a) In person meetings</p> <p>b) Survey</p> <p>c) Focus groups</p> <p>d) Informal conversations</p> <p>e) Representation on committee to form nutrition policy</p> <p>f) Other (describe)</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p> <p>d. ____</p> <p>e. ____</p> <p>f. ____</p>
24_3.	<p>Did you receive useful feedback to improve the policy implementation?</p> <p>a) Yes</p> <p>b) No</p>	<p>___ yes</p> <p>___ no</p>
24_4.	<p>Overall, was the feedback you received positive, negative, or a combination?</p>	<p>___ Positive</p> <p>___ Negative</p> <p>___ Combination</p>
	<p>CLIENT RECIPIENTS</p>	
25_1.	<p>Did you communicate the new nutrition policy to clients/recipients of food?</p> <p>a) Yes</p> <p>b) No</p> <p>c) No, we do not communicate with clients</p> <p>IF NO, SKIP TO QUESTION 27_1</p>	<p>___ yes</p> <p>___ no</p> <p>___ N/A (do not communicate with clients)</p>
25_2.	<p>Did you use any of the following methods to communicate the new nutritional policy to clients/recipients of food?</p> <p>a) In-person meetings</p> <p>b) Mailed letters</p> <p>c) Email</p> <p>d) Phone call</p> <p>e) Event</p> <p>f) Other (describe)</p>	<p>a. ____</p> <p>b. ____</p> <p>c. ____</p> <p>d. ____</p> <p>e. ____</p>

		f. ____
25_3.	Which was the most important method you used to communicate the policy to clients/recipients of food?	
26_1.	Did you solicit feedback on the nutrition policy from clients/recipients of food? a. Yes b. No	____ yes ____ no
26_2.	Did you solicit feedback on the nutritional policy through any of the following methods? a) In-person meetings b) Survey c) Phone call d) Email e) Other (describe)	a. ____ b. ____ c. ____ d. ____ e. ____
26_3.	What type of feedback did you receive?	____ Positive ____ Negative ____ Combination

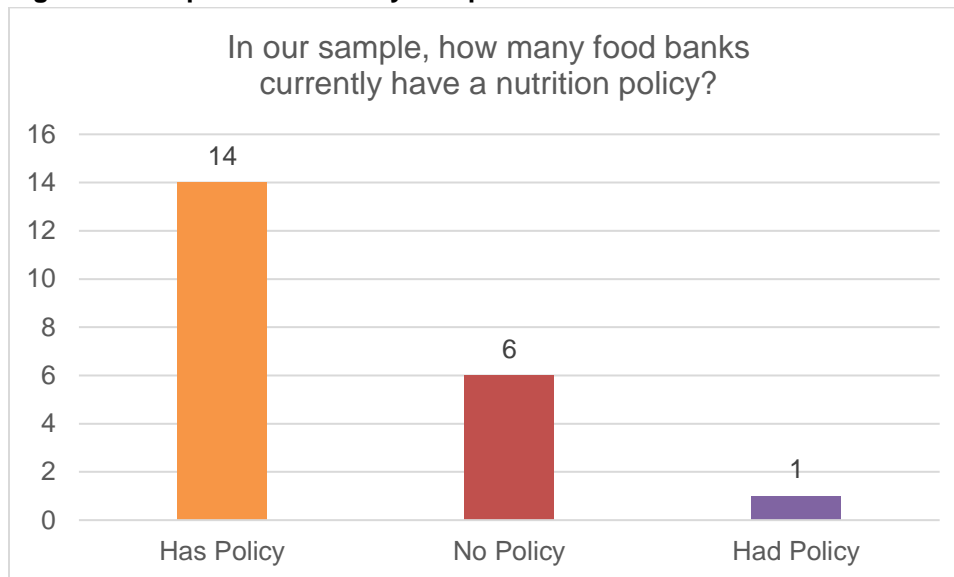
WRAP UP QUESTIONS

42_1.	Did your process of creating or implementing the policy reveal any potential best practices you might like to share with food banks that would like to replicate your success?	
42_2.	Are there any questions you think we should have asked, or other thoughts you'd like to add?	
42_3.	Is it okay to follow up if we have further questions in the future?	

END

Appendix B: Descriptive Statistics

Figure 8. Composition of Study Sample



Figures 9 and 10. Percentage of Donations Received from National, Regional and Local Donors

Figure 9.

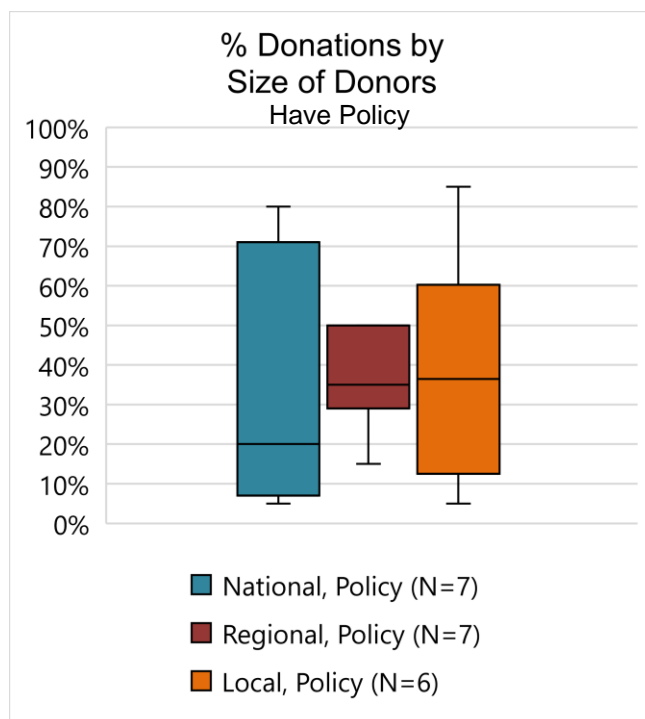


Figure 10.

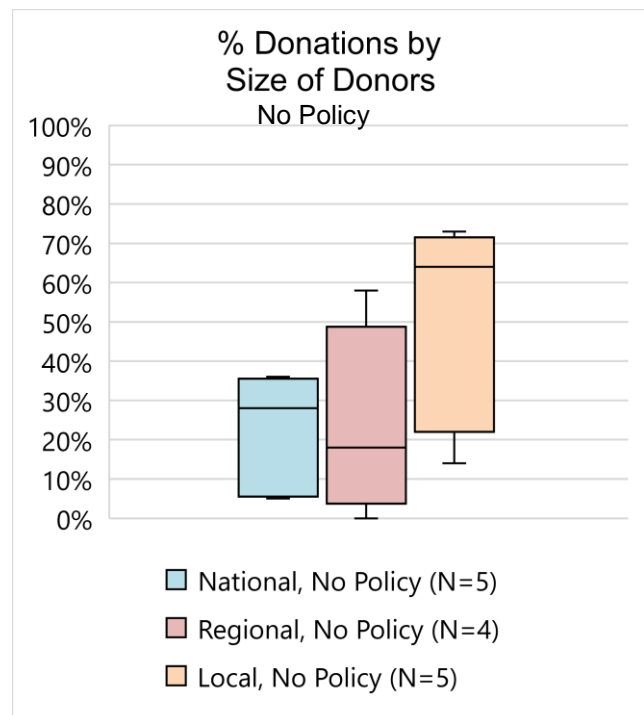


Figure 11. Food Banks with Nutrition Policies Reporting Whether Nutrition Policy Working Groups Experienced Differences of Opinion

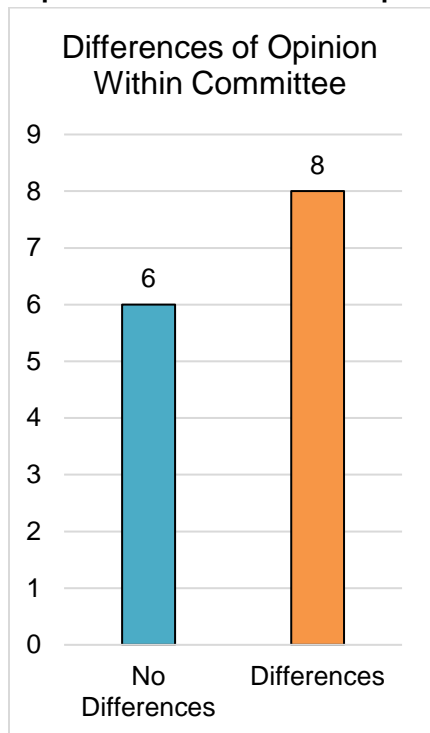


Figure 12. Frequency of Nutrition Tracking Systems Reported by All Survey Respondents

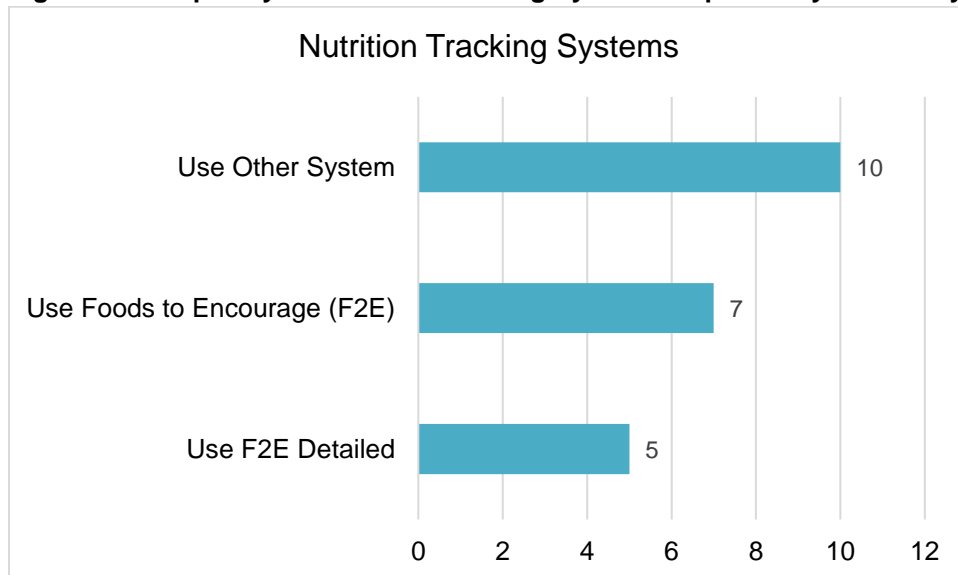


Figure 13. Frequency of Communication Methods among Internal Stakeholders

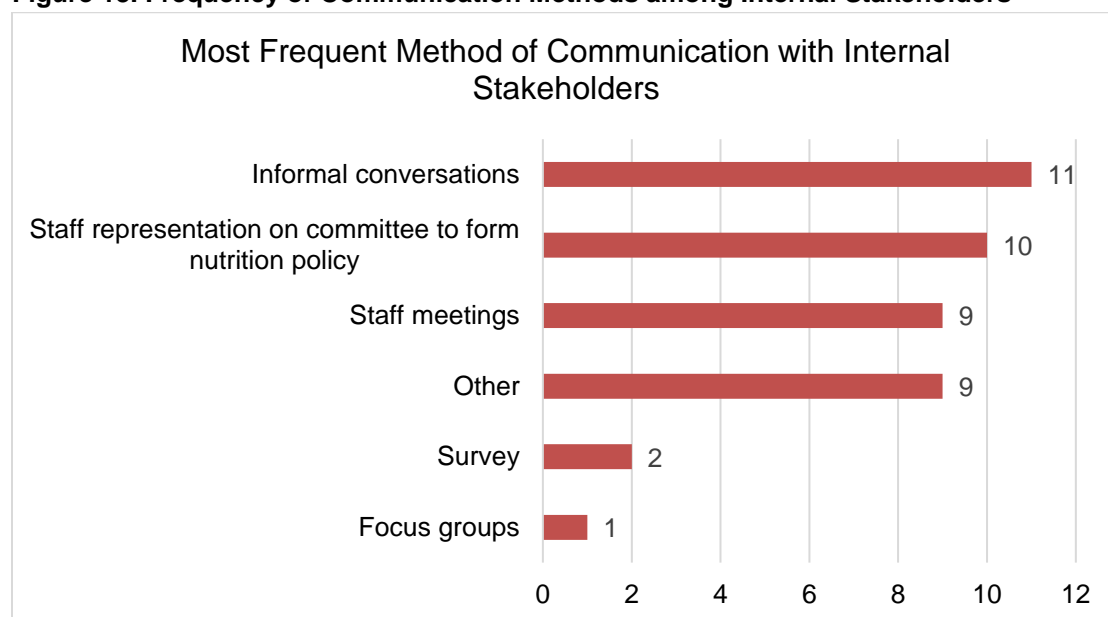


Figure 14. Frequency of Feedback Strategies among Internal Stakeholders

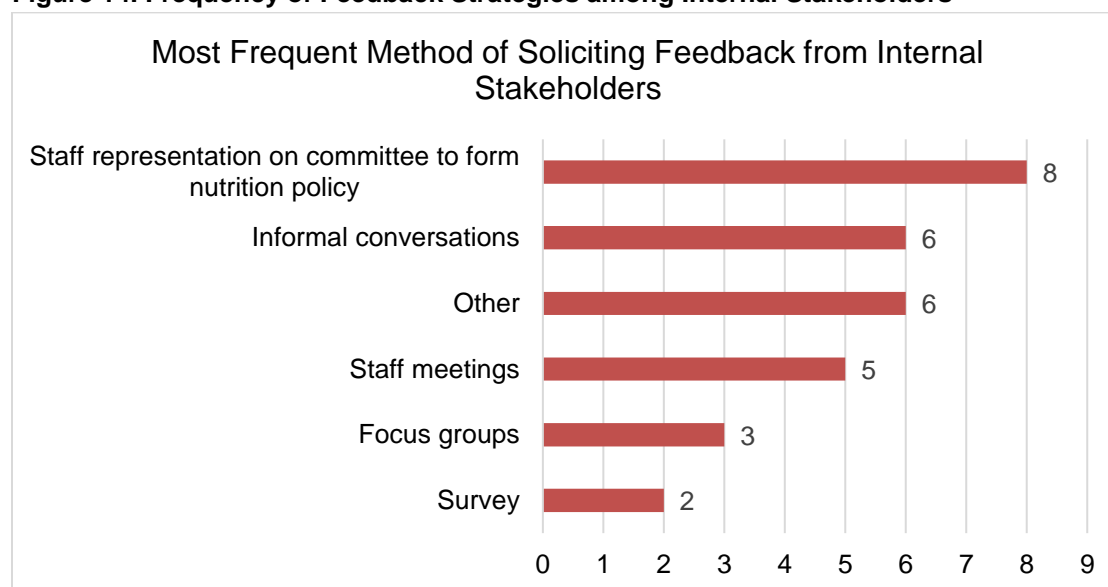


Figure 15. Frequency of Communication Methods among Member Agencies

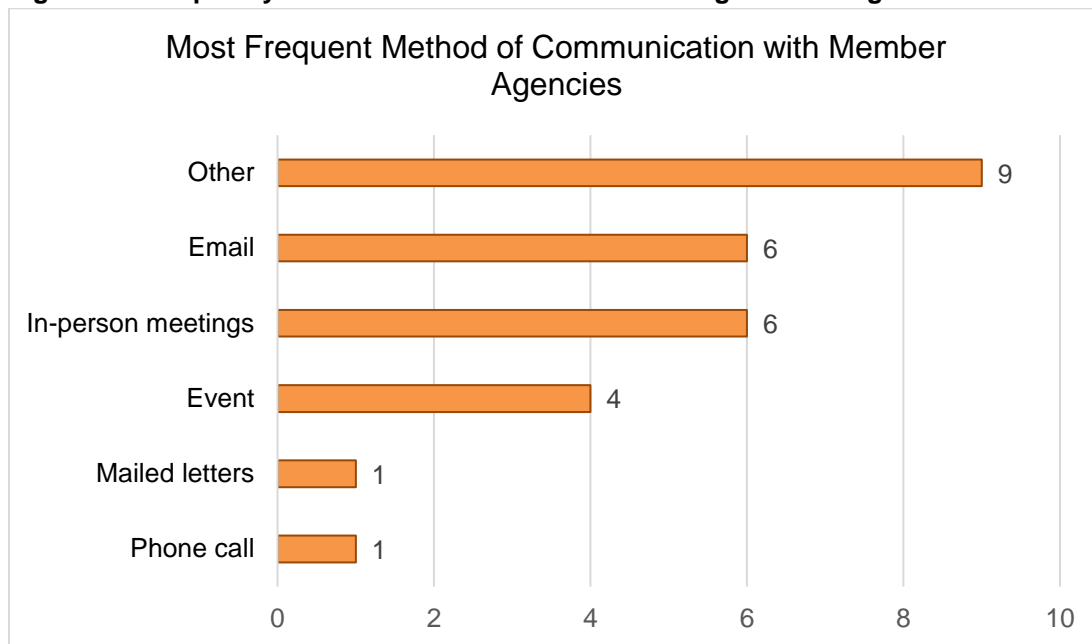


Figure 16. Frequency of Feedback Strategies among Member Agencies

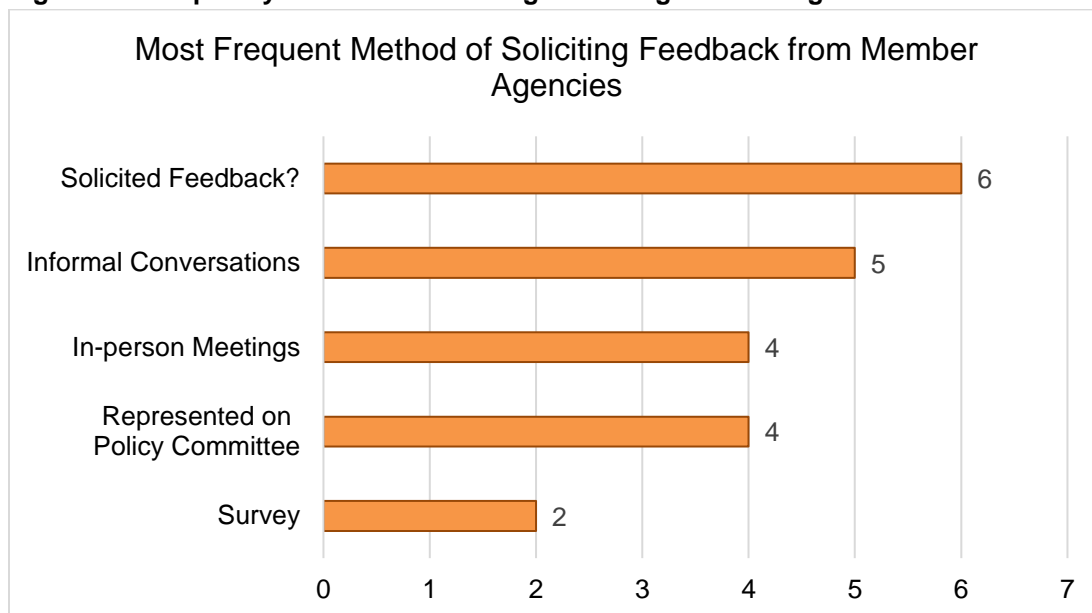


Figure 17. Frequency of Communication Methods among Donors

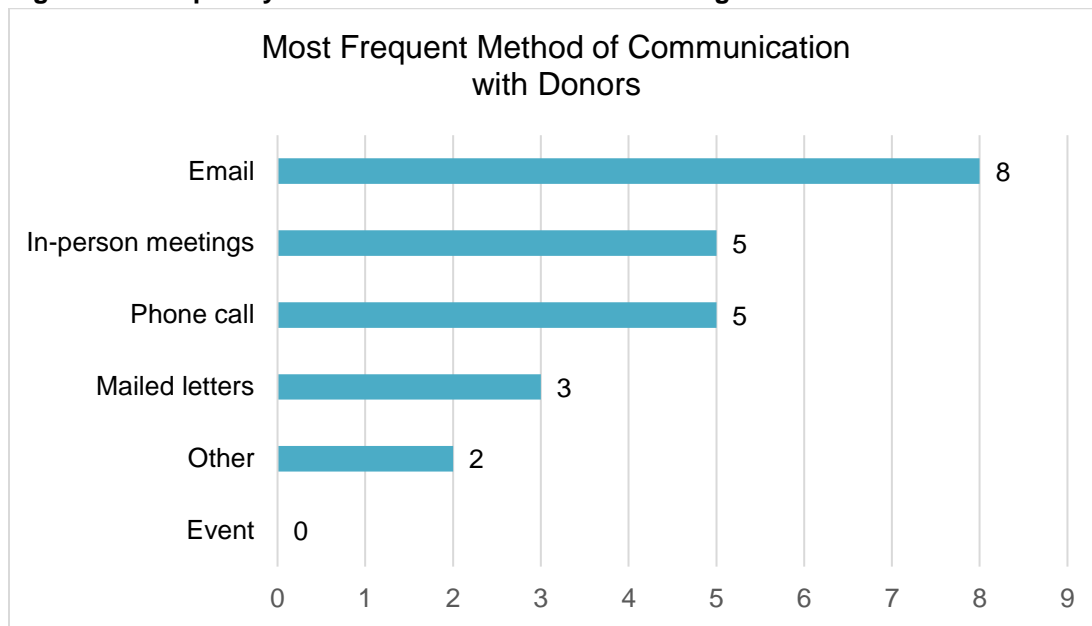


Figure 18. Frequency of Feedback Strategies among Donors

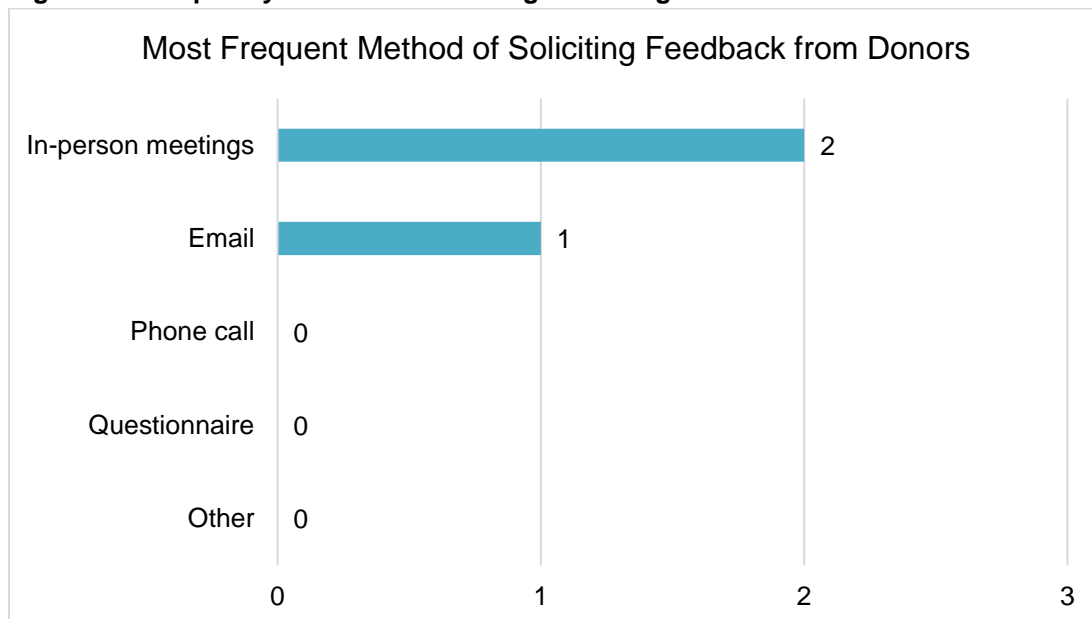


Figure 19. Frequency of Donor Objections among Food Banks with Nutrition Policies

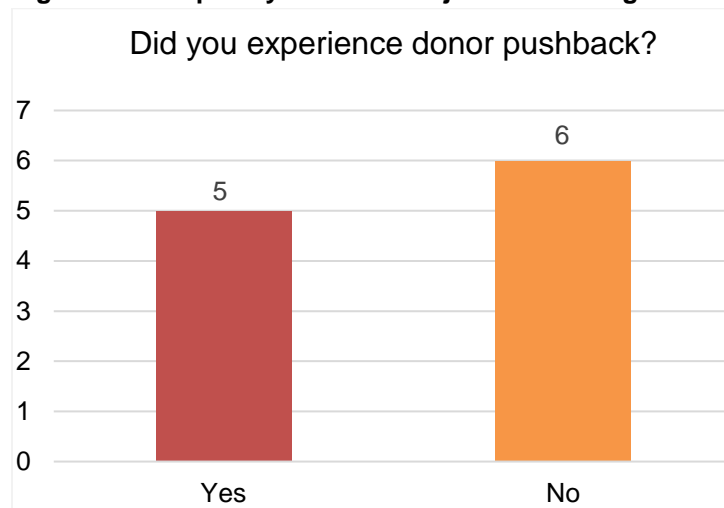


Figure 20. Types of In-kind Donors that Objected to Nutrition Policies

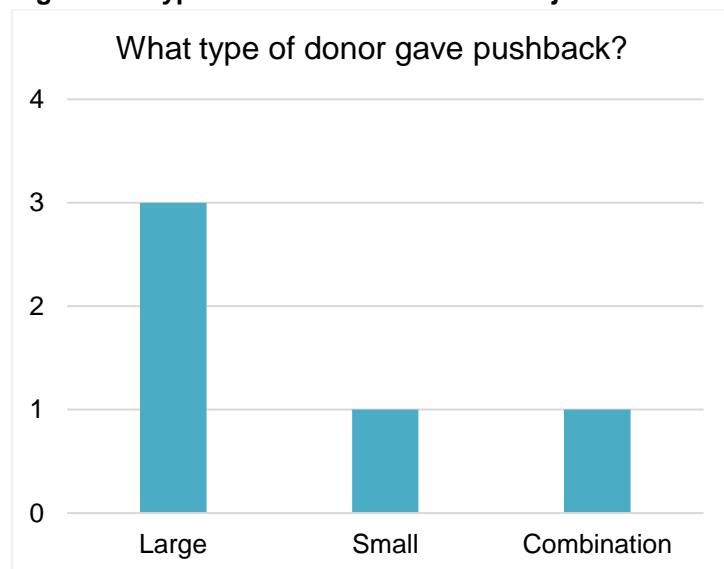


Figure 21. Hypothetical Incentives to Encourage Policy Compliance from In-Kind Donors

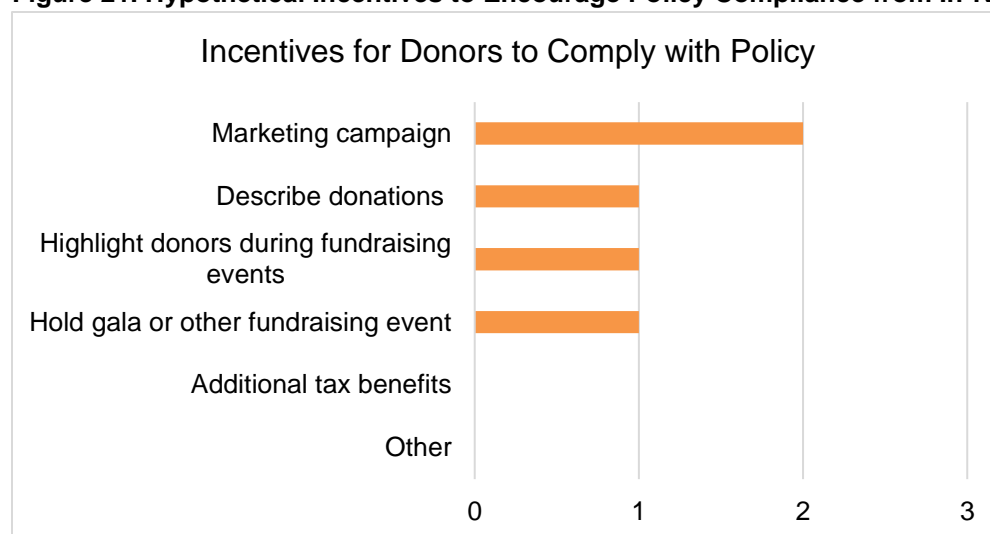


Figure 22. Proportion of Food Banks with Nutrition Policies that Reject Donations on Nutritional Grounds

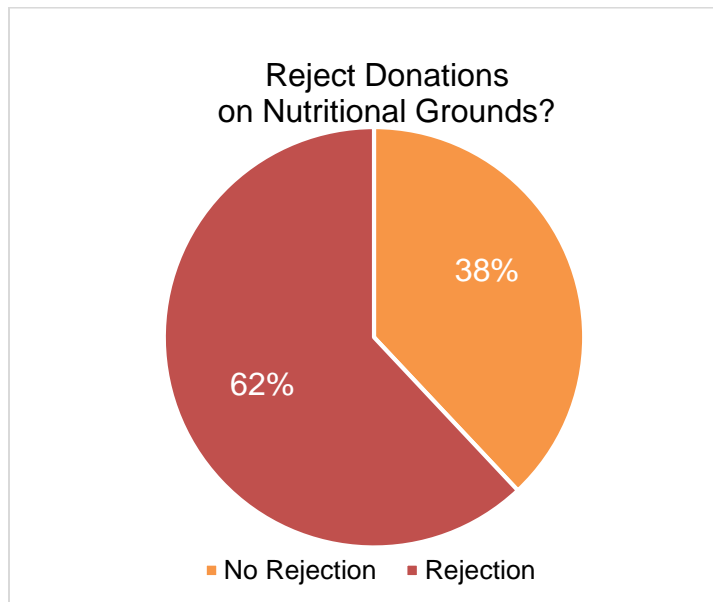


Figure 23. Frequency of Changes Reported in the Quantity of Donated Foods after Policy Implementation

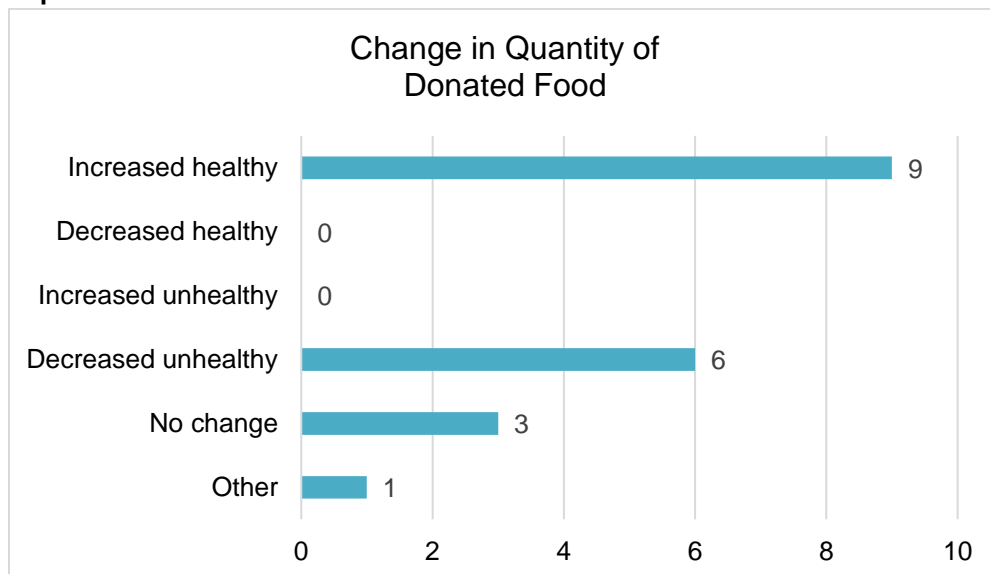
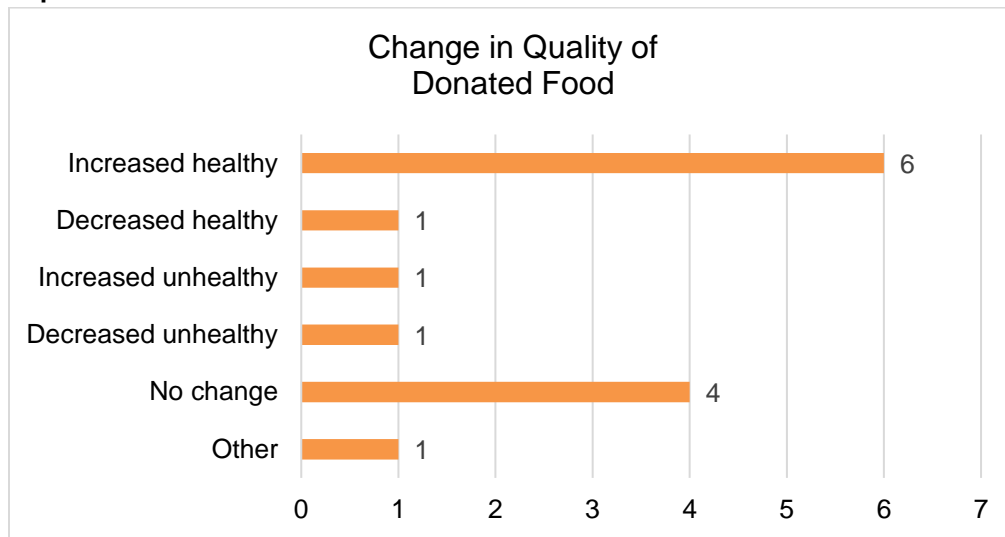
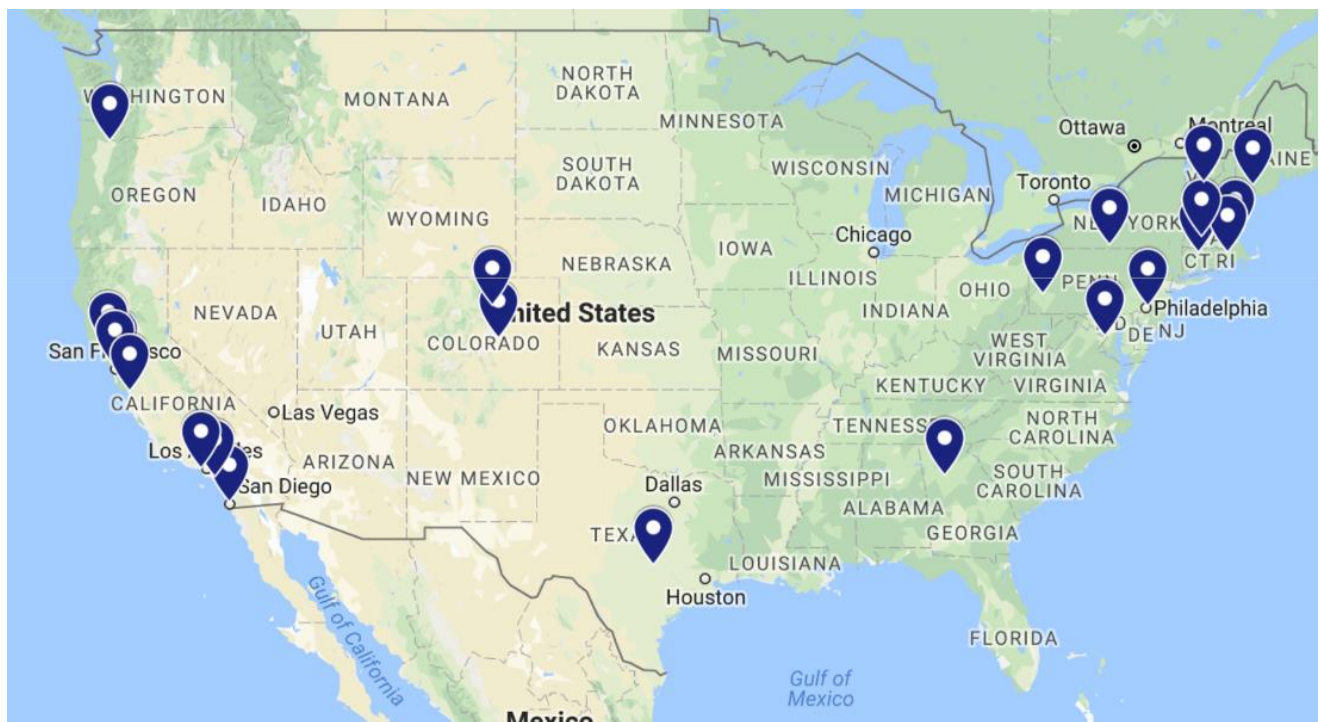


Figure 24. Frequency of Changes Reported in the Quality of Donated Foods after Policy Implementation



Appendix C: Map of Survey Respondents



Appendix D: Costs and benefits of having a written nutrition policy

A food bank's donor relationships, resources, and other contextual factors will affect how each cost and benefit should be weighed.

Benefits	Costs
<ul style="list-style-type: none">• Alignment of food bank's policy and actions with nutrition education programming.• New opportunities for grant funding from health-oriented organizations.• New donor relationships with healthcare companies as a result of prioritizing public health.• Opportunities to educate the public (particularly individual food drive donors) about the importance of fresh, healthy food for disease prevention.• Opportunities to build community capacity through new collaborations with local public health boards and institutions such as neighboring universities.• More efficient use of warehouse space.	<ul style="list-style-type: none">• Potential for damaging relationships with food donors and losing board members, if they also act in that capacity.• Potential decrease in annual pounds of food received and distributed.• Potential loss of financial donations.• Staff and leadership time to create and communicate the policy.• Need to train staff and volunteers to recognize unwanted foods• Additional time to sort food.• Cost of unwanted food storage and disposal, if not rejecting foods.

Appendix E: Feeding America's Food Bank Classification System

The following information was provided by the client, the Food Bank of Western Massachusetts, as background for this study:

Factors Determining Environmental Peer Groups

- Service Area Size – The total of square miles included in all the counties in a service area. These are plotted on a continuum from “smaller” size to “larger” size.
- Food Insecurity – The number of food insecure persons (as defined by the Map the Meal Gap work) for the service area is used to describe the actual need in that area. The results are then applied to a continuum across the network, starting at “lower need” and going up to “higher need”. We should note that “lower need” describes number of persons deemed food insecure when compared to other service areas. It does not mean that there is a low amount of need in those areas. The actual number of people who are food insecure is not adjusted for service areas that include many variances such as rural, urban, dense and sparse counties.
- Cost to Operate – We believe cost to operate affects the environment in which an organization operates (salary levels, operational costs, effect on poverty in the community, etc.). The ACCRA Cost of Living Index by county includes Housing, Transportation, Utilities, Groceries, Healthcare, and Miscellaneous factors. We use the Composite value for each county in which the food bank is located, for each county in which a branch of the food bank is located, and for each county in which a Partner Distribution Organization is located. These are plotted on a continuum from “lower” cost to operate to “higher” cost to operate.
- Available Resources – A combination of sources for available funds and food are used for this factor. To determine available funds, we used the data from Giving USA to identify funds available to Hunger Relief organizations based on median household income for the service area. To determine available foods, we used retail store median volume based on data from ACNielsen (over 30,000 retail stores in the US), FMCE forecasts prepared by consultants, and local produce opportunities as developed by USDA, specifically for produce items categorized as “Hard 7”. The combination of food and funds creates a continuum that describes members as in areas with higher or lower resources relative to the Network.

Environmental Peer Groups: Breakpoints for Each Factor

	High	Intermediate	Low
Size	>45,000 square miles	Between 10,000 and 45,000 square miles	<10,000 square miles
Need	>400,000 food insecure individuals	Between 140,000 and 400,000 food insecure individuals	<140,000 food insecure individuals
Resources	>\$77,000,000 combined resources	Between \$25,000,000 and \$77,000,000 combined resources	<\$25,000,000 combined resources
Cost to Operate	>110 index	Between 99 and 110 index	<99 index

Environmental Peer Groups

Banana	Intermediate Service Area, Low Need, Low Resources, Lower Cost to Operate
Grape	Small Service Area, Low Need, Low Resources, Intermediate Cost to Operate
Peach	Small Service Area, Low Need, Low Resources, Low Cost to Operate
Papaya	Large Service Area, Intermediate Need, Intermediate Resources, Intermediate Cost to Operate
Mango	Small Service Area, Low Need, Low Resources, High Cost to Operate
Blueberry	Intermediate Service Area, High Need, High Resources, Intermediate Cost to Operate
Pineapple	Small Service Area, Intermediate Need, Intermediate Resources, Intermediate Cost to Operate
Orange	Large Service Area, Intermediate Need, Intermediate Resources, High Cost to Operate
Cherry	Intermediate Service Area, Intermediate Need, Intermediate Resources, Low Cost to Operate
Strawberry	Small Service Area, Intermediate Need, Intermediate Resources, High Cost to Operate
Tangerine	Small Service Area, High Need, High Resources, Intermediate Cost to Operate
Watermelon	Small Service Area, Intermediate Need, Low Resources, Intermediate Cost to Operate
Lime	Intermediate Service Area, Intermediate Need, Intermediate Resources, Intermediate Cost to Operate
Pear	Intermediate Service Area, Intermediate Need, Low Resources, Low Cost to Operate
Apricot	Small Service Area, Low Need, Intermediate Resources, High Cost to Operate
Apple	Small Service Area, High Need, High Resources, High Cost to Operate